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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

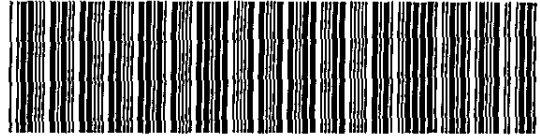
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILE
2005 APR 18 PM 12:50
TALLAHASSEE, FLORIDA

↓ BRYAN APR 21 2005

Nevada Corporate Center, Inc.

2248 Meridian Boulevard, Suite H
Minden, Nevada 89423

775-782-2201 - Main
877-683-9343 - Main -Toll Free
775-824-0105 - FAX
775-284-7178 - Tina Direct

April 15, 2005

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Application by Foreign Limited Liability Company
1777 Sophias Drive #208, LLC

Dear Registrar:

In connection with the referenced limited liability company, please find enclosed the following documents:

1. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
2. Certificate of Designation of Registered Agent/Registered Office
3. Nevada Certificate of Existence with Status in Good Standing

Also please find enclosed our check in the amount of \$130.00 for payment as follows:

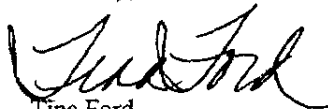
\$100.00 - filing fee for application
\$ 25.00 - Designation of Registered Agent
\$ 5.00 - Certificate of Status

Kindly return any confirmation and the Certificate of Status to my attention at:

Tina Ford
c/o Sutton Law Center
348 Mill Street
Reno, NV 89501

Thank you for your service. Should you have any questions, please don't hesitate to contact me toll free at the number listed above.

Sincerely,



Tina Ford,
Account Representative

:tf
enclosures

2005 APR 18 PM 12:50
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 1777 SOPHIAS DRIVE #208, LLC
(Name of Foreign Limited Liability Company)

2. NEVADA
(Jurisdiction under the law of which foreign limited liability company is organized)

3. N/A
(FEI number, if applicable)

4. MARCH 9, 2005
(Date of Organization)

5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 2248 MERIDIAN BLVD, SUITE H
MINDEN, NV 89423
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

ANNELIESA HUNDT, 2249 MERIDIAN BLVD., SUITE H, MINDEN, NV 89423

JAMES C. HUNDT, 2249 MERIDIAN BLVD., SUITE H, MINDEN, NV 89423

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: REAL ESTATE INVESTMENT

James C. Hundt
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
JAMES C. HUNDT

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

1777 SOPHIAS DRIVE #208, LLC

2. The name and the Florida street address of the registered agent and office are:

POWELL CARNEY GROSS MALLER & RAMSAY P.A.

(Name)

1 PROGRESS PLAZA NO. 1210

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

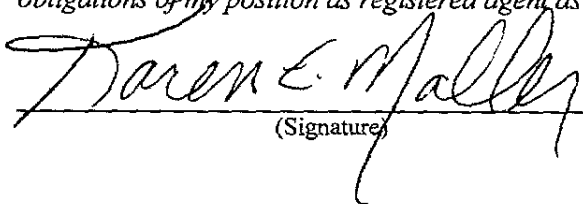
ST. PETERSBURG,

FL 33701

City/State/Zip

2005 APR 18 PM 12:50
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

SECRETARY OF STATE

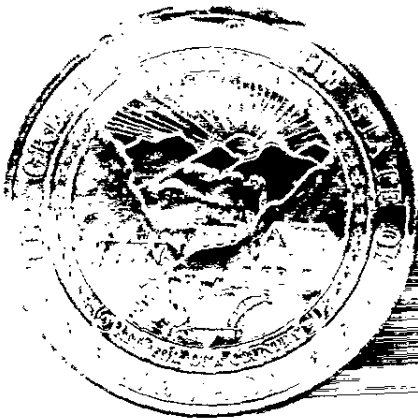


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TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **1777 SOPHIAS DRIVE #208, LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since March 9, 2005, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 14, 2005.

Dean Heller

DEAN HELLER
Secretary of State

By

[Signature]
Certification Clerk