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(Re	equestor's Name)
(Ad	ddress)
(Ad	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bu	usiness Entity Name)
	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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#### TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations
2
SUBJECT: NextDoorNetwork, LLC
(Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Stephen Miller
(Name of Person)
·
NextDoorNetwork, LLC
(Firm/Company)
400 W. 7th Street, Suite 210
(Address)
हेर्न्स <b>प्रा</b>
Planeter IN 47404
Bloomington, IN 47404
(City/State and Zip Code)
For further information concerning this matter, please call:
Stephen Miller at ( 812 ) 331-1600
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
409 E. Gaines Street P.O. Box 6327
Tallahassee, Florida 32399 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
✓ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate  Certificate of Status Certified Copy of Status & Certified Copy

### 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:

(Name of Foreign	n Limited Lia	bility Company)	
Indiana	3	35-2134478	
(Jurisdiction under the law of which foreign limited company is organized)	Tliability 5.	(FEI number, if appli	icable)
March 21, 2001	5.	Perpetual	
(Date of Organization)	_ ~	(Duration: Year limited liability co exist or "perpetual")	ompany will cease to
		<b></b>	
(Date first transacted bus (See sections 608.501 & 60	iness in Flor 08.502 F.S. t	ida, if prior to registration.) o determine penalty liability)	
2838 Shadow View Circle			May-rang
Maitland, FL 32751		-	105. 2005.
(Stre	et Address o	Principal Office)	<b>34 5</b> •
. If limited liability company is a manager-	managed o	ompany, check here	-2 367.6 867.6
. The name and usual business addresses of	f the mana	ging members or managers are	as follows:
Resite Management, LLC, 400 W. 7th St., So			
Pinnacle Investment Group, LLC, 400 W. 7th	n St., Suite	210, Bloomington, IN 47404	
0. Attached is an original certificate of existence, no mo			
ne jurisdiction under the law of which it is organized. (A anslation of the certificate under oath of the translator n			a toreign language, a
arbianon of the conficate drigor control the translation to	nas oc saom	(BOL)	
1. Nature of business or purposes to be con	ducted or	promoted in Florida: sale of we	bsites, resident
portals, and payment solutions to owners & m	nanagers of	multi-family housing communities	
RJI	Je	2	
Signature of a membe	r or an aut	norized representative of a mem	nber.
(In accordance with section 6	08.408(3), F.S	I, the execution of this document constituty that the facts stated herein are true.)	
an animination under the pens		•	

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.

The many of the Timber of Timble Commence in

Next Door Network, 11c	
2. The name and the Florida street address of the registered agent and office are:	
Grez Starr  (Name)  (Name)  2838 Shadow View Circle  Florida Street Address (P.O. Box NOT ACCEPTABLE)  Maitland  FL 3275/  City/State/Zip	a conse

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.

> \$ 100.00 Filing Fee for Application

Designation of Registered Agent \$ 25.00

\$ 30.00 Certified Copy (optional) 5.00 Certificate of Status (optional)

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

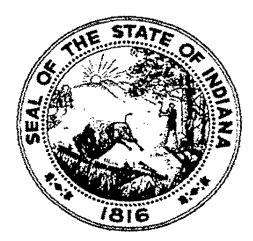
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### **NEXTDOORNETWORK, LLC**

duly filed the requisite documents to commence business activities under the laws of State of Indiana on March 21, 2001, and was in existence or authorized to transact business in the State of Indiana on April 25, 2005.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana; at the city of Indianapolis, this Twenty-Fifth Day of April, 2005.

TODD ROKITA, Secretary of State

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