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<b>SERVICES</b> 15		ORPORATION NAME (S) AND DOCUMENT NUMBER (S);
Filing Evidence  □ Plain/Confirmation	Сору	Type of Document  Certificate of Status
⊠ Certified Copy		☐ Certificate of Good Standing
•		□ Articles Only
Retrieval Request  □ Photocopy		<ul> <li>All Charter Documents to Include Articles &amp; Amendments</li> <li>Fictitious Name Certificate</li> </ul>
□ Certified Copy		□ Other
NEW FILINGS		AMENDMENTS
Profit		Amendment
Non Profit		Resignation of RA Officer/Director
Limited Liability		Change of Registered Agent
Domestication		Dissolution/Withdrawal
Other		Merger
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OTHER FILINGS		REGISTRATION/QUALIFICATION
Annual Reports		Foreign
Fictitious Name	X	Limited Liability
Name Reservation		Reinstatement
Reinstatement		Trademark

Other

### 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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")	e of transacting business in Florida and attach a copy of the written name. The alternate name must include "Limited Liability
	95-4850007
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. March 13, 2001 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
5. n/a	ASS OF
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. 1	tida, if prior to registration.) to determine penalty liability)
7. 8491 West Sunset Boulevard, Ste. 497	T.P.
West Hollywood, California 90069	f Principal Office)
	f Principal Office)
3. If limited liability company is a manager-managed of	
7. The name and usual business addresses of the mana	ging members or managers are as follows:
Jeff Greene, President, Millennium Holdings, Inc., 8491	West Sunset Blvd #497 West Hollowood CA 90069
Sen Cicere, Fredagent, Millermann Fredarigs, 116., 040 F	TVOST COLLEGE MADEL INSCRIPTION PROCESSION
<ol> <li>Attached is an original certificate of existence, no more than 90 da he jurisdiction under the law of which it is organized. (A photocopy</li> </ol>	ays old, duly authenticated by the official having custody of records in
ranslation of the cartificate under oath of the translator must be subm	
11. Nature of business or purposes to be conducted or	promoted in Florida. Real estate investment
That die of business of purposes to be confidence of	promoted in Florida,
	•
	<u></u>
Signature of a member of an aut	horized representative of a member.  5., the execution of this document constitutes
an affirmation under the penalties of perju-	ry that the facts stated herein are true.)
John & Burgee	
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 Compa	any is:	
1538 N. Vista	, LLC		
If name unav	ailable, the alternate name to be	e used in the state of Florida is:	
2. The name	and the Florida street address of	of the registered agent and office are:	,
	NRAI Services, Inc.		_
		(Name)	
	2731 Executive Park Drive, St	uite 4 ress (P.O. Box NOT ACCEPTABLE)	<u>,</u>
	Florida Sureet Addi	ess (F.O. BOX (NOT ACCEPTABLE)	
	Weston	FL 33331 City/State/Zip	-
liability compagent and agr relating to the	any at the place designated in the ree to act in this capacity. I furth proper and complete performat my position as registered agent	o accept service of process for the above s is certificate, I hereby accept the appoint her agree to comply with the provisions of nce of my duties, and I am familiar with a cas provided for in Chapter 608, Florida i	ment as registered fall statutes nd accept the
' Ae	\$100.00 \$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	·

#### State of California

#### Secretary of State

## CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **13th day of March, 2001, 1538 N. VISTA, LLC,** became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 10, 2007.



Jehn Bowen

**DEBRA BOWEN**Secretary of State