

Florida Department of State

Division of Corporations Public Access System

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(((H080000663613)))



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Division of Corporations

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From:

Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Positive Home Solutions, LLC

| Certificate of Status | 0 | |
|-----------------------|----------|--|
| Certified Copy | 0 | |
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March 17, 2008

FLORIDA DEPARTMENT OF STATE Division of Corporations

BUSINESS FILINGS

SUBJECT: POSITIVE HOME SOLUTIONS, LLC

REF: W08000013759

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division s records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L07000022951. To regularity website L

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097

Marsha Thomas

FAX Aud. #: H08000066361
P.O BOX 6327 - Tallahassee, Florida 32314

P.02

Regulatory Specialist II

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mber: 808A00015913

PLORIDA DEPARTMENT OF STATE Division of Corporations

PILED
PR -8 AM 8: 19
SECRETARY OF STATE
SECRETARY OF STATE

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

| We, the undersigned, do hereby certify that w | ve are the Managers and/or Managing | |
|---|--|-----------|
| Members of Positive Home Solution | ons,LLC | |
| | Liability Company) | |
| a limited liability company duly organized an | d existing under the laws of | |
| Nevada | | |
| (State or Country of Organization) | - | |
| Because the name of this foreign limited liabi | ility company does not satisfy the | |
| requirements of the s. 608.406, F.S., the limit | ed liability company hereby adopts the | |
| following name to transact business in the sta | ite of Florida: | 88 第 等 |
| Lakeland Real Estate Investm | ent Services, LLC | 國之世 |
| (Name to be used by limited liability company in Florida. N Company, L.L.C., or LLC.) | IOTE: Name must end with Limited Liability | 震 = |
| Date: 4/1/08 | | OF ST |
| Signature(s) of Manager(s) and/or Managing | Member(s): | 公園 |
| Comed Cha | Kenneth Anderson | |
| NV8 Nantis | Maria Victoria Nantes | |
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CR2E122 (7/07)

H0800000163613

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOILDWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| Positive Home Sol | | • |
|------------------------|--|----------------|
| | (Name of foreign limited liability company) | |
| Nevada | 3 EIN # 26-1896691 | |
| Jurisdiction under the | he law of which foreign limited liability 3. EIN # 26 - 1896691 (FEI number, if applicable) | • |
| co | mpany is organized) | |
| 1/31/2008 | 5. lestonal | |
| (Date | (Duration Year limited liability company will cease to exist or "perpetual") | - |
| April I | 2008 | - |
| (Dat | te first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) | |
| 184 Hillcrest Dri | ve, Daly City, California 94014 | |
| | · · | g y |
| | (Street address of principal office) | E |
| | (Succe admess of burnelsat office) | Į |
| If limited liabili | ty company is a manager-managed company, check here | Ĩ |
| The name and u | sual business addresses of the managing members or managers are as follows: | |
| Kenneth Anders | son, P.O. Box 7393, Lakeland, Florida 33807 | _ |
| Maria Victoria I | Nantes, 184 Hillcrest Drive, Daly City, California 94014 | |
| | | - |
| the jurisdiction und | inal certificate of existence, no more than 90 days old, duly authenticated by the official having custody of re ler the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language crifficate under oath of the translator must be submitted.) | |
| . Nature of busi | ness or purposes to be conducted or promoted in Florida: | |
| Real Estate Invest | ment | |
| | | • |
| | Kondh Clark MVS Martes | |
| | 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.) | |
| | Kenneth Anderson, Member MARIA VICTORIA- NANTES, Rem | Der |

Typed or printed name of signee

4080000443413

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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.

| | of the Limited Liability e Solutions, LLC | Company is: | | | |
|--|--|---|---|--|---------------------|
| 2. The name | and the Florida street ac | idress of the registere | d agent and office | are: | |
| | Business Filings Incor | porated | | | 2 |
| | | (Name) | | | 验 号 |
| | 1203 Governors Squar | e Blvd., Suite 101 | | <u> </u> | 19 R-8 |
| | Florida at | reet address (P.O. Box N | OT ACCEPTABLE) | | SSE E |
| | Tallahassee, | FL 323 (City/State/Zip) | 01-2960 | | A 8: 19 OF STATE |
| liability comp registered ag statutes relati | named as registered age pany at the place designatent and agree to act in thing to the proper and condigations of my position of (Signature) | ted in this certificate, . is capacity. I further in plete performance of | I hereby accept the agree to comply wi my duties, and I ar provided for in Cha | appointment as th the provisions of all n familiar with and apter 608, F.S. | ፝፟፞፞ |

\$ 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



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certifyed 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, POSITIVE HOME SOLUTIONS, 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 January 31, 2008, 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 March 4, 2008.

> > **ROSS MILLER** Secretary of State

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Certification Clerk

