# M11000000880

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:  L. SELLERS
FEB 18 2011
EXAMINER

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12/27/10--01037--002 \*\*125.00



#### **COVER LETTER**

√
TO:

Registration Section Division of Corporations

SUBJECT: Tr	uHome S	olutions, LL0	3	
		Name	of Limited Liability Compa	ny
				on to Transact Business in Florida," Certificate of d liability company to transact business in Florida
Please return all	correspondence	concerning this matte	er to the following:	
	Keith Varne	<b>ә</b> у		
			Name of Person	
	TruHome S	olutions, Inc		
			Firm/Company	
	9777 Ridge	e Drive		
			Address	
	Lenexa, KS	66219		
			City/State and Zip Code	
	pdagostin	o@truhomes	olutions.com be used for future annual re	port potification)
		,		port notification)
For further inform	mation concerni	ng this matter, please	call:	
Paul	D'Agostino		at (913 Area Code & Daytime T	981-6714
	Name	of Person	Area Code & Daytime T	elephone Number
	ING ADDRESS n of Corporation		STREET ADDRESS: Division of Corporations	
	ation Section		Registration Section	
P.O. Bo		ı	Clifton Building	
Tallaha	ssee, FL 32314		2661 Executive Center Circ Tallahassee, FL 32301	le
	check for the Filing Fee	following amount \$130.00 Filing Fee Certificate of Status	& []\$155.00 Filing Fee &	& \$160.00 Filing Fee, Certificate of Status & Certified Copy
	· .		,	



December 29, 2010

KEITH VARNEY 9777 RIDGE DRIVE LENEXA, KS 66219

SUBJECT: TRUHOME SOLUTIONS, LLC

Ref. Number: W10000059729

We have received your document for TRUHOME SOLUTIONS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign 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. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent ofthe managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name 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 liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

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) 245-6967.

Letter Number: 510A00030068

Leslie Sellers Regulatory Specialist II

#### -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. TruHome Solutions, LLC	
/ 1 OL 1	fude "Limited Liability Company," "L.L.C.," or "LLC.")
TH Solutions, LLC	ose of transacting business in Florida and attach a copy of the written
(If name unavailable, enter alternate name adopted for the purp	ose of transacting business in Florida and attach a copy of the written
consent of the managers or managing members adopting the all Company," "L.L.C," "LLC.")	ternate name. The alternate name must include "Limited Liability
2. Missouri (Jurisdiction under the law of which foreign limited liability	3. (FEI number, if applicable)
company is organized)	(PEI number, II applicable)
4. July 9, 2004	5 Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to
	exist or "perpetual")
6.	
(Date first transacted business in F (See sections 608.501 & 608.502 F.	Florida, if prior to registration.)
,	o. to determine pondity macrity)
7. 9777 Ridge Drive	· · · · · · · · · · · · · · · · · · ·
Lenexa, KS 66219	
(Street Addres	s of Principal Office)
· · · ·	
8. If limited liability company is a manager-manage	d company, check here ✓
9. The name and usual business addresses of the ma	naging members or managers are as follows:
7. The hame and usual business addresses of the ma	maging members of managers are as follows.
Keith Varney, 9777 Ridge Drive, Lenexa, F	(S 66219
•	O days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photoco	
translation of the certificate under oath of the translator must be su	***
11. Nature of business or purposes to be conducted	or promoted in Florida: To provide mortgage loans
	A Part of the Part
	्राप्तः । फ्रिल् का स्वरो
Signature of a member or an a	nuthorized representative of a member.
	ecution of this document constitutes an affirmation under the
	true. I am aware that any false information submitted in a
Keith Varney	tes a third degree felony as provided for in s.817.155, F.S.)
. Keitti vainey	

Typed or printed name of signee

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

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of Tru Home Solutions, LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
(State or Country of Organization)
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
TH Solutions, LLC  (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: Feb 11, 2011
Signature(s) of Manager(s) and/or Managing Member(s):
Keith Varney

### 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 state of Florida is:
ess of the registered agent and office are:
nion
(Name)
t
Address (P.O. Box NOT ACCEPTABLE)
FL 32202 City/State/Zip
r

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)

FEB 17 PH 3:30

# STATE OF MISSOURI



Robin Carnahan Secretary of State

## CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

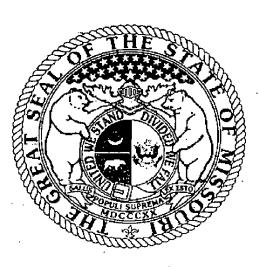
I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

#### TRUHOME SOLUTIONS, LLC LC0599390

was created under the laws of this State on the 9th day of July, 2004, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 4th day of October, 2010

Secretary of State



Certification Number: 13226695-3 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp