M13000006293

(Request	or's Name)	
(Address)	
(Address	\	
(Address)	
(City/Sta	te/Zip/Phone #)	
PICK-UP] WAIT	MAIL
(Busines	s Entity Name)	
•		
(Docume	ent Number)	
Certified Copies	Certificates of S	status
Special Instructions to Filing		
•	Jy .	0
	254	
	0~	
·		

Office Use Only



900251615499

09/16/13--01023--013 **130.00

2013 OCT -7 AN IO 21
SECRETARY OF STATE

COVER LETTER

TO:

TO: Registration Section Division of Corporations			
SUBJECT: Home Salvers, 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:			
Lisa Newkirk-Svarezhepf Name of Person			
Firm/Company			
2086 Weaver Brk Dr.			
2086 Weaver Park Dr. Address Clearwater, FL. 33765 City/State and Zip Code			
Keums va Dyahoo. Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
LISO Newkirk - Svarczlupf at 340 277-1585 Name of Person Area Code & Daytime Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\int\\$125.00\text{ Filing Fee} \text{\$\frac{1}{2}}\$130.00\text{ Filing Fee & Certificate of Status} \$\int\\$155.00\text{ Filing Fee & S160.00\text{ Filing Fee, Certificate of Status}} \$\int\\$160.00\text{ Filing Fee, Certificate of Status} \$\int\\$155.00\text{ Filing Fee & Certificate of Status} \$\int\\$160.00\text{ Filing Fee, Certificate of Status}			



September 17, 2013

LISA NEWKIRK-SVARCZKPF 2086 WEAVER PARK DRIVE CLEARWATER, FL 33765

SUBJECT: HOME SOLVERS, LLC Ref. Number: W13000051511

We have received your document for HOME SOLVERS, LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 313A00021791

To:

Neysa Culligan

Regulatory Specialist II

From: Kevin A Svarczkopf Registered Agent Home Solvers, LLC

Doc#: L13000092038

Ms. Culligan,

This is to inform you that we have no intention of revoking the dissolution of the above company, therefore, releasing the name for use to the entity attached to this letter.

We have just recently moved so if you have any questions feel free to contact me at the following address:

Kevin A Svarczkopf 557 Wilkie St Dunedin, FL 34698

Sincerely,

Kevin A Svarczkopi 10/1/13

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE		UBMITTED TO REGIST	ER A FOREIGN
1. Home Solvers LC (Name of Foreign Limited Liability Company; must include "L		pany," "L.L.C.," or "LLC)
(If name unavailable, enter alternate name adopted for the purpose of t consent of the managers or managing members adopting the alternate to Company, "L.L.C," "LLC.")	ransacting business in name. The alternate n	n Florida and attach a cop ame must include "Limit	by of the written ed Liability
company is organized)	(FEI numb	oer, if applicable)	
4. 7 26 13 5. (1) ate of Organization)	Per Detu Duration: Year limite exist or "perpetual")	al d liability company will	cease to
6. 91513 (Date first transacted business in Florida, (See sections 608.501 & 608.502 F.S. to de	if prior to registration	ı.) lity)	2013 OC
7. 2086 Weaver Park Dr	<u>^.</u>		- 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
Clear Water, FL. 337 (Street Address of Pri	65 incipal Office)		E STA
8. If limited liability company is a manager-managed com	pany, check here		10A 21
9. The name and usual business addresses of the managin Lisa Newkirk-Svarczkoff . 208 Kevin A. Svarczkoff . Ci	86 Weaver	Pork Dr.	
William F. Newkirk	it	11	
Keuni S. Svarczkopf	i.	ι(
10. Attached is an original certificate of existence, no more than 90 days of the jurisdiction under the law of which it is organized. (A photocopy is not translation of the certificate under oath of the translator must be submitted.)	ot acceptable. If the ce	by the official having cus atificate is in a foreign lan	tody of records in Iguage, a
11. Nature of business or purposes to be conducted or pro	omoted in Florida:		
Management Services	406		•
Signature of a member or an author			
(In accordance with section 608.408(3), F.S., the execution penalties of perjury that the facts stated herein are true. I document to the Department of State constitutes a the	am aware that any fal	se information submitted	l in a
LISA Newkijk Typed or printed na	_ − S V ⊃ V C Z me of signee	Kopf	

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:	
Home Solvers, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are: Keuri A. Svarczkopf (Name) 2086 Weaver Park Dr. Florida Street Address (P.O. Box NOT ACCEPTABLE) Clearwater FL City/State/Zip	FILED. 2013 DOT -7 M DF 21 SECHLIARY OF STATE SECHLIARSEE, 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.

Kning Skaret

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, **HOME SOLVERS**, **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 July 26, 2013, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20130906-1208
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 6, 2013.

ROSS MILLER Secretary of State