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COVER LETTER

TO:	Registration Section
	Division of Cornoration

Rezenerate, 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 ma	tter to the following:	
Ryan Rabah		
 	Name of Person	the file of the state of the st
Rezenerate, LL	С	
	Firm/Company	·
5806 Highland	Shoppes Driv	e, STE A2-196
	Address	
Charlotte, NC 2	8269	
	City/State and Zip Code	
info@rezenerate	e.com	
E-mail address:	(to be used for future annual rep	ort notification)
For further information concerning this matter, please	se call:	
Ryan Rabah	, 754	800-4936
Name of Contact 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 Circ Tallahassee, FL 32301	cle
Enclosed is a check for the following amou		
■ \$125.00 Filing Fee ■ \$130.00 Filing	g Fee & 🔲 \$155.00 Filing	Fee & \$160.00 Filing Fee, Certificate

Certified Copy

Certificate of Status

of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 1, 2014

RYAN RÉBAH REZENERATE, L.L.C. 5806 HIGHLAND SHOPPES DR STE A2-196 CHARLOTTE, NC 28269

SUBJECT: REZENERATE, L.L.C. Ref. Number: W14000027583

We have received your document for REZENERATE, L.L.C. 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 listed in number one of the application must be identical to the name listed in the certificate of existence.

The document must contain the usual business addresses of its managing members or managers.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Teresa Brown Regulatory Specialist II

Letter Number: 314A00009327

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED	TO REG	ISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Rezenerate, LLC.		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must i	nclude "I	 imited
Liability Company," "L.L.C." or "LLC.")	IIDIQQC E	
2. North Carolina 3. 46-475196		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4 N/A	=======================================	
(Date first transacted business in Florids, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	: AY	a vij
5. 5806 Highland Shoppes Drive, STE A2-196	-9	Amene.
Charlotte, NC 28269		_ [1]
(Street Address of Principal Office) 5806 Highland Shoppes Drive, STE A2-196	3:0	
6 5806 Highland Shoppes Drive, STE A2-196	07 TE	~~~
Charlotte, NC 28269		
(Mailing Address)		-
7. The name, title or capacity and address of the person(s) who has/have authority to manage is	/are:	
Ryan Rabah MGR.		<u> </u>
5806 Highland shoppes Drive, STE A-2-196		<u> </u>
charlotte, NC 28269	·	<u>. </u>
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated be having custody of records in the jurisdiction under the law of which it is organized. (A photocop acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of must be submitted)	v is pot	
Signature of an authorized person		
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the fact sin aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.8)	is stated her	vin are true
Ryan Rabah	(1.4 dd (F n))	,

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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: Rezenerate, LLC.		
If unavailable, the	alternate to be used in the state of Florida is:	
2. The name and t	the Florida street address of the registered agent and office are:	
F	Rodney Rabah	
	(Name)	
1	031 SW 3rd Street	
_	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
н	allandale Beach, FL 33009	
_	City/State/Zip	

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 605, Florida Statutes.



\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

REZENERATE, L.L.C.

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 6th day of February, 2014, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 24th day of April, 2014.

Elane & Marshall

Secretary of State

Certification# 95505728-1 Reference# 12013072-ca Page: I of 1 Verify this certificate online at www.secretary.state.nc.us/verification