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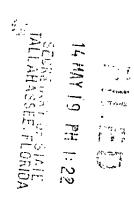
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

то:	Registration Section Division of Corporations		
SUBJE	CT: Creative Home Se	ervices, LLC of Limited Liability Company	
	losed "Application by Foreign Limited Liabice, and check are submitted to register the abo		
Please re	eturn all correspondence concerning this mat	ter to the following:	
	Randy Brewer		
		Name of Person	
	Creative Home	Services, LLC	
	· ·	Firm/Company	
2046 Blue River Rd			
		Address	
	Holiday, FL 346	91	
		City/State and Zip Code	
	chstampabay@g	gmail.com	
	E-mail address: (to be used for future annual report notifi	cation)
For furth	her information concerning this matter, please	e call:	
	Randy Brewer	_{at} 727 69	7-7343
	Name of Contact Person	Area Code D	aytime 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	
Enclose	ed is a check for the following amoun \$\mathbb{B}\$\$ \$125.00 Filing Fee Certificate of \$100.00 Filing \$100.00 F	Fee & □ \$155.00 Filing Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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 REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Creative Home Services, LLC		
	y; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
Creative Home Services of Florid		
(If name unavailable, enter alternate name adopted for the Liability Company," "L.L.C," or "LLC.")	purpose of transacting business in Florida. The alternate name must include "Limited	
₂ Georgia	_{3.} 26-0718128	
(Jurisdiction under the law of which foreign limited liab company is organized)		
4. (Date first transacted	business in Florida, if prior to registration.)	
(See sections 605,0904)	& 605.0905, F.S. to determine penalty liability)	
_{5.} 2046 Blue River Rd.		
Holiday, FL 34691		
•	treet Address of Principal Office)	
_{6.} Same		
	(Mailing Address)	
	# ·	
7. The name, title or capacity and address o	of the person(s) who has/have authority to manage is/are:	
Randy Brewer, Member		۱ د
2046 Blue River Rd	100 Q	
Holiday, FL 34691		
	OR.	
having custody of records in the jurisdiction acceptable. If the certificate is in a foreign lamust be submitted)	ence, no more than 90 days old, duly authenticated by the officia under the law of which it is organized. (A photocopy is not inguage, a translation of the certificate under oath of the translate	
Mh		
	ature of an authorized person locument constitutes an affirmation under the penalties of perjury that the facts stated herein are	true.
	ne Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	
Randy Brewer	•	

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.

 The name of the Limited Liability Company i 	1.	The name	of the	Limited	Liability	Company	y is:
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Creative Home Services, LLC

If unavailable, the alternate to be used in the state of Florida is:

Creative Home Services of Florida, LLC

2. The name and the Florida street address of the registered agent and office are:

Randy	y Brewer	
	(Name)	
2046	Blue River Rd.	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Holiday	_{FL} 34691	
	City/State/Zip	12 c 50 c 10 c

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.

(Signature)

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

STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER DATE INC/AUTH/FILED: August 15, 2007 JURISDICTION

PRINT DATE

: Georgia : May 15, 2014

: 07069563

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

> CREATIVE HOME SERVICES, LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Brian P. Kemp Secretary of State