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To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : LEGALZOOM.COM INC.  
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Phone : (323) 962-8600  
Fax Number : (323) 962-3889

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**Foreign Limited Liability Company  
SUNCOAST HOME SOLUTIONS LLC**

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$155.00

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SUNCOAST HOME SOLUTIONS 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:

Imelda Vasquez

Name of Person

Legalzoom.com, Inc.

Firm/Company

100 W. Broadway Suite 100

Address

100 W. Broadway Suite 100

City/State and Zip Code

bdou24@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Imelda Vasquez

Name of Person

at ( 323 )

Area Code & Daytime Telephone Number

962-8600

**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:

☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☒ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

**IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:**

**SUNCOAST HOME SOLUTIONS LLC**

1. \_\_\_\_\_  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  
**SunCoast Flooring and Home Solutions LLC**

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. **Montana** 3. **463429951**  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. **01/17/2014**  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0903, F.S. to determine penalty liability)

5. **7518 38th Street Cir. e, Sarasota, Florida 34243**

6. **7518 38th Street Cir. e, Sarasota, Florida 34243**  
(Street Address of Principal Office)

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Brian Dougherty, Member 7518 38th Street Cir E, Sarasota, Florida 34243

Jeff Cohn, Member, 7111 Switchgrass Trail, Lakewood Ranch, FL 34202

Allan Hudson, Member, 7518 38th Street Cir E, Sarasota, Florida 34243

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

  
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 facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in § 817.135, F.S.)

**Brian Dougherty**

Typed or printed name of signer

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14 JUL 28 AM 9:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:  
**SUNCOAST HOME SOLUTIONS LLC**

If unavailable, the alternate to be used in the state of Florida is:  
**SunCoast Flooring and Home Solutions LLC**

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

**United States Corporation Agents, Inc.**

(Name)

**13302 Winding Oaks Blvd., Suite A**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

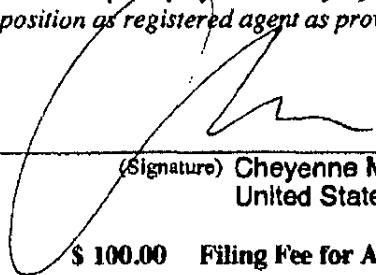
**Tampa**

**33688**

FL

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.*

(Signature)  **Cheyenne Moseley, Assistant Secretary on behalf of  
United States Corporation Agents, Inc.**

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

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TALLAHASSEE, FLORIDA

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## SECRETARY OF STATE STATE OF MONTANA

### CERTIFICATE OF EXISTENCE

I, Linda McCulloch, Secretary of State of the State of Montana, do hereby certify that

#### SUNCOAST HOME SOLUTIONS LLC

duly filed its Articles of Organization in this office on 8 August 2013, and on that date was created a limited liability company.

I further certify that all fees reflected in the records of the Secretary of State have been paid by said limited liability company and that the most recent annual report has been filed with this office.

I further certify that no articles of dissolution have been placed on record in this office by said limited liability company and my records indicate the limited liability company is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 28 July 2014 .

A handwritten signature in cursive script that reads "Linda McCulloch".

LINDA MCCULLOCH  
Secretary of State

Certified File Number: C239940

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