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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations

RIFCT: Alpha Major 5087 Properties, LLC

To:

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:

| Scott Phillips | | | |
|--|---|----------------------------|-----|
| | Name of Person | | |
| Alpha Major 508 | 37 Properties | s, LLC | |
| | Firm Company | | |
| 12 Wood Crest | Lane | | |
| | Address | · <u>-</u> | |
| Palm Coast, FL | 32164 | | |
| · · · · · · · · · · · · · · · · · · · | City:State and Zip Code | | |
| info@alphamajo | r5087.com | | |
| 1-mail address: | (to be used for future annual re | report notification) | |
| For further information concerning this matter, pleas | e call: | | |
| Scott Phillips | ,7 7 5 | 629-2814 | |
| Name of Contact Person | Area Code | e 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 Ci Tallahassee, Ft. 32301 | . · | |
| Enclosed is a check for the following amou S125,00 Filing Fee | g Fee & \$155.00 Filir | - | ate |



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 17, 2014

JAY PHILLIPS 701 N GREEN VALLEY PKWY SUITE 200 HENDERSON, NV 89074

SUBJECT: ALPHA MAJOR 5087 PROPERTIES LLC

Ref. Number: W14000037678

We have received your document for ALPHA MAJOR 5087 PROPERTIES 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):

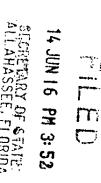
Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 714A00013111



From: Chris Pagan

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: Alpha Major 5087 Properties, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") III name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.E.C." or "FLC.") Nevada (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905; F.S. to determine penalty liability) 399 Palm Coast Pkwy, SW Suite 2 Palm Coast, FL 32137 (Street Address of Principal Office) 6 12 Wood Crest Lane Palm Coast, FL 32164 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Scott Phillips, Manager, and Jay Phillips, Manager 12 Wood Crest Lane Palm Coast, FL 32164 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

the 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 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree fellow as provided to: in \$.817.455, F.S.)

Typed or printed name of signee

Scott Phillips

FILED

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GORENARY OF STATE

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 Co Alpha Major 5087 Pro | | |
|---|---|--|
| If unavailable, the alternate to be used in | n the state of Florida is: | |
| 2. The name and the Florida street addr | ess of the registered agent and office are: | |
| Scott Phillips | 6 | |
| <u></u> | (Name) | |
| 12 Wood Cre | est Lane | |
| Florida Suee | t Address (P.O. Box NOT ACCEPTABLE) | |
| Palm Coast | FL 32164 | |
| · | City State/Zip | |

Having been named as registered agent and to accept service of process for the above stated limited hability company at the place designated in this certificate. Thereby 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)

7)

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

THE LE LY SECRETARY OF STAIL



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

), 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, ALPHA MAJOR 5087 PROPERTIES, 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 April 2, 2014, and is in good standing in this state.



Electronic Certificate
Certificate Number C20140610-1951
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 June 10, 2014.

ROSS MILLER Secretary of State

SEGRETARY OF STATE

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