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J. HARRIS

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: HAPPY HOMES IND PROPERTIES, CLC. Name of Limited Liability Company
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:
rease return an correspondence concerning this matter to the fortowing.
TIMOTHY 5. POWDERFER Name of Person
/ Name of Person
Firm/Company
6240 - 1-00 - 100
S240 THORDIN RD
Address
City/State and Zip Code
City/State and Zip Code
TIM @ HAPPY Homes . PROPERTIES E-mail address: (6 be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
The second secon
- 100 1. 0-11
TIMOTHY S. POWDEX FER at (904) 731-6328 Name of Contact Person Area Code Daytime Telephone Number
(Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations Division of Corporations
Registration Section Registration Section
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32301
Enclosed is a check for the following amount:
☐ \$125.00 Filing Fee \$\infty\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$
Certificate of Status Certified Copy 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:

. HAPPY Howa'S AND PROPIR TIES, LLC. (Name of Foreign Limited Liability Company," "L.L.C.	C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate liability Company," "L.L.C," or "LLC.")	ate name must include "Limited
2. NEVADA (Jurisdiction under the law of which foreign limited liability) 3. 47 - 30/2847 (FEI number, if a	
company is organized)	ррпсаоте
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	2015 SEC TALI
5. 1756 UNIVERSITY BLVD SOUTH	AR THE
	25 ASS
Street Address of Principal Office)	MG P
5. 5240 THORDEN RD, JACKSONVILLE, FG 32207	FLORA :
	<u> </u>
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority	_
TIMOTHY S. POWDINTER, MANAGER, SOMO THORDEN R RANDY E BISHOP, MANAGER, 900 SOUTH PENINSULA	D. D. C. P. P. C. P. P. C. P. C. P.
KANDY E BISHOP, MANAGER, 900 SOUTH PENINSULA	DR. #207, DAYTONA &
	FC, 32118
3. Attached is an original certificate of existence, no more than 90 days old, duly authorized custody of records in the jurisdiction under the law of which it is organized. acceptable. If the certificate is in a foreign language, a translation of the certificate unust be submitted)	(A photocopy is not
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 an aware that any false information submitted in a document to the Department of State constitutes a third degree felony as: The Thy Control of Contro	
TIMOTHY S. POWDET-TER 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.

2. The name and the Florida street address of the registered agent and office are:	
INCORP SERVICES, INC	2015 FEB 25 TALLAHASSE
1 888 67 III COURT NORTH Florida Street Address (P.O. Box NOT ACCEPTABLE)	E ST
LOXAHAT CHEE, FL 33470 City/State/Zip	FLORIDA 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 605, Florida Statutes.

\$ 100.00 Filing Fee for Application

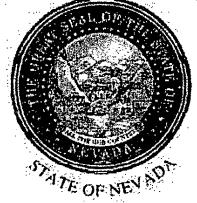
\$ 25.00 Designation of Registered Agent

on hehalf of Incorp Services, Inc.

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, 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, HAPPY HOMES AND 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 January 23, 2015, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 3, 2015.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20150203-2115
You may verify this electronic certificate
online at http://www.nvsos.gov/

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