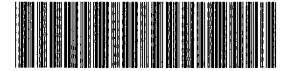
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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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K.SALY EXAMMER WAY 21 2015

COVER LETTER

Division of Corporations					
SUBJECT: URIVA PROPERTIES 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:					
<u>Jessica Thomas</u>					
Name of Person					
Firm/Company					
117 Lantern Ln.					
Deland FL 32720 City/State and Zip Code					
URILAPROPERTIES @ AMAIL. COM E-mail address! (to be used for future annual report notification)					
For further information concerning this matter, please call:					
USSICATIONAS at 380 837-9620 Name of Contact Person at Code Daytime Telephone Number					
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					
Enclosed is a check for the following amount: \$\int \\$125.00 \text{ Filing Fee} \text{ \$130.00 \text{ Filing Fee & Certificate of Status} \text{ Certified Copy} \text{ of Status & Certified Copy} \$\int \\$160.00 \text{ Filing Fee, Certificate of Status & Certified Copy} \$\int \\$160.00 \text{ Filing Fee, Certified Copy} \$\int \\$160.00 Filing Fee, Certified Copy} \$\int \\$16					

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 Diva Proportios IIC
(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 include "Limited Liability Company," "L.L.C," or "LLC,")
2 NOVADA 110 2 47-3481572
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
1)00 - (100; c to 0 t) to
(Date first transacted blusiness in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
s. III Cantern Cn.
Deland, Fl 32720
(Street Address of Principal Office)
6. 117 Lantern Ln.
Deland, Fl 32720
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Jessica Thomas, Manager, 117 Lantern Cr. Deland
FL. 32720
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)
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 s.817.155, F.S.)
JOSSICA THOMAS
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.

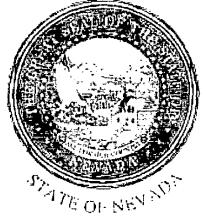
1. The name of the Limited Liability Company is:

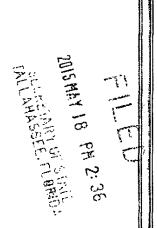
URIKA PROI	PERTIES, LLC		
If unavailable, t	ne alternate to be used in	the state of Florida is:	TI L
2. The name an	d the Florida street addre	ss of the registered agent and office are:	95 PR 22
Business Filings Incorporated		36	
(Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Plantation	FL 33324 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.

Mary & Spalinger, Asst. Secretary

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 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, URIKA 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 March 3, 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 May 7, 2015.

Ballora K. Cegarske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20150507-1475
You may verify this electronic certificate
online at http://www.nvsos.gov/