(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
•		
. (Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration Section Division of Corporation	ns		
SUBJECT:	thurn SD Re	al Estate LLo	<u></u>
			ansact Business in Florida," Certificate of y company to transact business in Florida
Please return all correspondence of	concerning this matter to the	following:	
	THORA SCH	OLER ame of Person	
5	olothurn So	Real Estate	LLC
	F	rm/Company	
<u> 363</u> .	Spring Haven	Loop	
	1 3	Address	
_ Spri	ng Hill FL 3 City/S	4608	
Thor	asholer a hotn E-mail address: (to be used	nail. com	tification)
For further information concerning			
THORA School	ler f Contact Person	at (646) 72 Area Code Day	vtime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrat Clifton B 2661 Exe	of Corporations ion Section Building ecutive Center Circle see, FL 32301
Enclosed is a check for the follow ☐ \$125.00 Filing Fee	ing amount: ☐ \$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 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. Solothurn So Real Estate LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "I)	
	LLC.")		
Over the Thresh Hold LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name Liability Company, "L.L.C," or "LLC.")	must incl	ude "Li	_ imited
2. Ne vada (Jurisdiction under the law of which foreign limited liability company is organized) 3. EO 48/17 2.0/5-1 (FEI number, if applicable)			_
4. Still in the process of Setting up my Business. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 363 Spring Haven Loop			
Spring Hill FL 34608 (Street Address of Principal Office)			
6. 363 Spring Haven Loop		15	
Spring Hill FL 34608 (Mailing Address)	AHAS	I AG	Carrientes
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	SEE.	H4 8	The state of
Name: THORA SCHOLER	FLO VIS	ယ္	
Office Address: 363 Spring Haven Loop	RIDA	ተተ	
Spring Hill , Florida 34608 (Zip code)			
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation a this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fu with the provisions of all statutes relative to the proper and complete performance of my duties, and I am a the obligations of my position as registered agent.	rther agi	ree to c	comply
(Registered agent's signature)			
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:			
THORA SCHOLER, Manager			
363 Spring Haven Loop			
Spring Hill FL 34608			
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having cu jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the translator must be submitted)	stody of he certific	record	s in the der oath
- The second sec			
Signature of an authorized person			
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any functions and accomment to the Department of State constitutes a third degree felony as provided for in s.817.13	alse infor 55, F.S.	matior	1

SECRETARY OF STATE



LIMITED LIABILITY COMPANY CHARTER

I, BARBARA K. CEGAVSKE, the Nevada Secretary of State, do hereby certify that SOLOTHURN SO REAL ESTATE, LLC did on October 12, 2015, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization are now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



Certified By: Electronic Filing
Certificate Number: C20151012-0582
You may verify this 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 October 12, 2015.

BARBARA K. CEGAVSKE
Secretary of State