## M1400000 1059

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FEBO 9 2016 J. HARRIS

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Holy Moly 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:
Allen Janeczko Name of Person
Firm/Company
5061 Spinet Drive Address
Address
Melhourne, FL 32940 City/State and Zip Code
Allen: Janeczko@gmail.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Allen Janeczko at (702) 353-7205  Name of Contact Person Area Code 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 Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:    Size   Si

## 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 FOR COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	REIGN LIMI	TED LIABILIT
1. Holy Moly Home Solutions Lile (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L	1028	<u></u>
/ (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C., or "L	uc.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name this business in Florida. The alternate name this business in Florida. The alternate name this business in Florida.	nust include	"Limited
01 172 - 00		
2. Nevada (Jurisdiction under the law of which foreign limited liability company is organized)  3. 81-1505829 (FEI number, if applicable)		
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
5. 5061 Spinet Drive		
Melbourne, FL 32940 (Street Address of Principal Office)		
6. P.O BOX 410135	<b>D</b> ** (	
Melbourne, FL 32901 (Mailing Address)	3.4 P	
(Mailing Address)	33.7	ထ
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	[1] r	72 * 1) **********************************
Name: Business Filings Incorporated		** 14c
Office Address: 1200 S. Pine Island Rd.	D <sub>rit</sub>	F
Plantation, Plorida 33324 (City) (Zip code)		
(City) (Zip code) Registered agent's acceptance:		
Having been named as registered agent and to accept service of process for the above stated corporation at	the place d	esignated in
this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fur with the provisions of all statutes relative to the proper and complete performance of my duties, and I am for	iner agree i amillar with	o comply and accept
the obligations of my position as registered agent.		
Blennock utter asst. Scretary (Registered agent's signature)		
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:		
Allen Janeczko, Manager	·····	
5061 Spinet Drive		
Allen Janeczko, Manager 5061 Spinet Drive Melbeurne, FL 32940		
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	stody of rec	ords in the
of the translator must be submitted)		
Signature of an authorized person		
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any f submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.1.	alse informa 55, F.S.	tion
Allen Janes Zko, Manager Typed or printed name of signee		

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, HOLY MOLY HOME SOLUTIONS, 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 December 30, 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 January 22, 2016.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160122-2048
You may verify this electronic certificate
online at http://www.nvsos.gov/