# M16000002539

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ad                     | ldress)            |           |
| (Ad                     | ldress)            |           |
| (Cit                    | ty/State/Zip/Phone | #)        |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | isiness Entity Nam | e)        |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |

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MAR 29 2016 J SHIVERS



#### **COVER LETTER**

TO: Registration Section

| Div               | ision of Corporation   | IS .   |                                     |   |   |  |
|-------------------|--|--|-------------------------------------|---|---|--|
| SUBJECT:          | EXCELLENT PRO  | PERTY SOLUTIONS, LLC   |                                     | _   |   |  |
|                   |  | Name of Limited Liability Company  |                                     |   |   |  |
|                   |  | eign Limited Liability Compa<br>I to register the above referen                      |                                     |   |   |  |
| Please return     | all correspondence c   | oncerning this matter to the f   | ollowing:                           |   |   |  |
|                   | DAVID BOGG   | s  |                                     |   |   |  |
|                   |  | Na   | me of Person                        |   |   |  |
|                   |  | Fir  | m/Company                           |   | <del></del>   |  |
|                   | 2565 WARREN  |  | , ,                                 |   |   |  |
|                   |  | _ <del>.</del>   | Address                             |   |   |  |
|                   | MELBOURNE  | FL 32904   |                                     |   |   |  |
|                   |  | City/Sta   | ate and Zip Code                    |   |   |  |
|                   | CONTACT@EX   | CELLENTPROPERTYSOL   | UITONS.COM                          |   |   |  |
|                   |  | E-mail address: (to be used  | for future annual i                 | report not  | ification)  |  |
| For further in    | nformation concerning  | g this matter, please call:  |                                     |   |   |  |
| DA                | VID BOGGS  |  | 321<br>at (                         | 634-279   |   |  |
|                   | Name o   | f Contact Person   | Area Code                           | Day   | time Telephone Number   |  |
| Div<br>Reg<br>P.O | ILING ADDRESS:<br>ision of Corporations<br>istration Section<br>. Box 6327<br>lahassee, FL 32314 |  |                                     | Division on<br>Registrati<br>Clifton Bo<br>2661 Exe | ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301 |  |
|                   | check for the follow<br>125.00 Filing Fee  | ing amount:  \$\Boxed{\Boxesia} \\$130.00 \text{ Filing Fee & Certificate of Status} | □ \$155.00 Filing<br>Certified Copy | g Fee &   | ☐ \$160.00 Filing Fee, Ce of Status & Certified Cop                           |  |

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

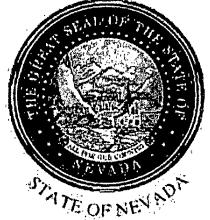
IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

|   | eign Limited Liability Company; must include  | e "Limited Liability Company," "L.L.C.," or   | "LLC.")  |
|---|---|---|--|
| (If name unavailable, enter a Liability Company," "L.L.C,   | Iternate name adopted for the purpose of trans " or "LLC.")   | sacting business in Florida. The alternate nam  | ne must include "Limited                         |
| 2. NEVADA   | 3.  |   |  |
| (Jurisdiction under the law company is organized)   | of which foreign limited liability  | (FEI number, if applicable)   | )  |
| 4   |   |   | _  |
|   | (Date first transacted business in Flo<br>(See sections 605.0904 & 605.0905, F.   | rida, if prior to registration.) .S. to determine penalty liability)  |  |
| 5. 2565 WARREN STRI   | EET MELBOURNE FL 32904  |   | _  |
|   | (Street Address of Principal  | Office  | _  |
| 6   | (Street Address of Principal  |   | _  |
|   |   |   | _  |
|   | (Mailing Address)   |   |  |
| 7. Name and street address  | ss of Florida registered agent: (P.O. Box   | NOT acceptable)   |  |
| Name:   | BUSINESS FILINGS INCORPORAT   | ED  |  |
| Office Address:   | 1200 SOUTH PINE ISLAND RD   |   |  |
|   | PLANTATION  | , Florida,  |  |
|   | (City)  | (Zip code)  | _  |
|   | egistered agent and to accept service of p  | gent and agree to act in this capacity. I   | further agree to comply                          |
|   | statutes relative to the proper and comp  | <b>A</b> 4 <b>O</b> .   | n familiar with and accep                        |
| with the provisions of all  | statutes relative to the proper and comp  | asst Scretary   | n familiar with and accept                       |
| with the provisions of all<br>the obligations of my pos   | statutes relative to the proper and complition as registered agent.   | asst Scretary   | n familiar with and accept  16 MAR 28  - HAR 28  |
| with the provisions of all the obligations of my post.  8. The name, title or capa  | statutes relative to the proper and completion as registered agent.  (Registered agent  | and Scrutary  mt's signature)  as/have authority to manage is/are:  | n familiar with and accept  16 MAR 28  16 MAR 28 |
| with the provisions of all the obligations of my pos.  8. The name, title or capa DAVID BOGGS - MAN.  | statutes relative to the proper and complition as registered agent.  (Registered agent acity and address of the person(s) who ha  | as/have authority to manage is/are: BOURNE FL 32904   | n familiar with and accept  16 MAR 28 MI         |
| with the provisions of all the obligations of my positive obligations of my positive or capa DAVID BOGGS - MAN.  JAMES ELDRIDGE - M  9. Attached is a certificate | statutes relative to the proper and complition as registered agent.  (Registered agent acity and address of the person(s) who ha AGER - 2565 WARREN STREET MELLANAGER - 2565 WARREN STREET Meter of existence, no more than 90 days old, or   | ast. Scrutary  int's signature)  as/have authority to manage is/are: BOURNE FL 32904  MELBOURNE FL 32904  duly authenticated by the official having   | To MAR 28 AM 9: 1                                |
| with the provisions of all the obligations of my positive obligations of my positive or capa DAVID BOGGS - MAN.  JAMES ELDRIDGE - M  9. Attached is a certificate | statutes relative to the proper and completion as registered agent.  BLOOG Registered agent.  (Registered agent acity and address of the person(s) who ha AGER - 2565 WARREN STREET MELICANAGER - 2565 WARREN STREET Melicanage acity and address of the person(s) who ha AGER - 2565 WARREN STREET Melicanage acity and address of the person(s) who has a city and address of the person (s) who has a city and a | ast Scrutary  int's signature)  as/have authority to manage is/are: BOURNE FL 32904  MELBOURNE FL 32904  duly authenticated by the official having e is in a foreign language, a translation of | SCORE TARY OF JUNE Custody of records in the     |

Typed or printed name of signee

**DAVID BOGGS - MANAGER** 

## 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, **EXCELLENT PROPERTY 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 February 22, 2016, and is in good standing in this state.

CALL OF THE STATE OF THE STATE

Electronic Certificate
Certificate Number: C20160229-3470
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 February 29, 2016.

BARBARA K. CEGAVSKE Secretary of State AR 28 AH 9: TI