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TO:

	ration Section on of Corporation	18				^A .		
SUBJEČT:	KOVACA	h Home.	S LLC me of Limited I.	iability Com	pany		· -	
		eign Limited Liability d to register the above						
Please return all	l correspondence c	concerning this matter	to the following	:				
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			Name of Pe	rson		· · · · · ·	_	
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		E-mail address: (to	be used for futur	e annual rep	ort notificatior	1)	-	
		g this matter, please c						
2.	should.	Kovach f Contact Person	at (7/3	5/3-	0969		
	Name o	f Contact Person	Ar	ea Code	Daytime Te	lephone Number		
Divisio Registr P.O. B	ING ADDRESS: on of Corporations ration Section ox 6327 assee, FL 32314			Div Rep Cli 266	REET ADDR vision of Corpo gistration Sect fron Building 61 Executive C llahassee, FL 3	orations ion Center Circle		
	eck for the follows 5.00 Filing Fee	ing amount: ☐ \$130.00 Filing For Certificate of Status		.00 Filing Fo d Copy		60.00 Filing Fee, C tus & Certified Co		3

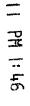
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FO COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	REIGN LIMITED LIABILITY
1. Kovach Homes LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L	100
(Name of Foreign Limited Liability Company, must include Limited Liability Company, L.L.C., of L	LC.)
(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 include "Limited
110	
2. LC 3. (FEI number, if applicable) company is organized)	
3-23-16	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 1520 ACapia HARBOR Place	
	6
(Street Address of Principal Office)	P H S S S S S S S S S S
Brandon FLORDIA 53511 (Street Address of Principal Office) 6. 1520 ACaDia HARBOR FIRE	= 5377
	3 990
Brandon FLORDIA 33511 (Mailing Address)	+5
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	5
T V	
Office Address: 1520 Acapia HARBOR PLACE	
Brandon, Florida 33511 (Zip code)	
Registered agent's acceptance:	
Having been named as registered agent and to accept service of process for the above stated limited liability designated in this application, I hereby accept the appointment as registered agent and agree to act in this to complywith the provisions of all statutes relative to the proper and complete performance of my duties, accept the obligations of my position as registered agent.	capacity. I further agree
Theotal Jank	
(Registered agent's signature)	
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
PRESIDENT MICHAEL J. KOVACH	
, , , , , , , , , , , , , , , , , , ,	
	
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 to of the translator must be submitted) Signature of an authorized person	stody of records in the he certificate under oath
Signature of an authorized person	
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any function and document to the Department of State constitutes a third degree felony as provided for in s.817.1	alse information 55, F.S.

MICHAEL J. KOVACH
Typed or printed name of signee

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show KOVACH HOMES, LLC, an Ohio For Profit Limited Liability Company, Registration Number 3875019, was organized within the State of Ohio on March 4, 2016, is currently in FULL FORCE AND EFFECT upon the records of this office.





Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 8th day of March, A.D. 2016.

Ohio Secretary of State

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Validation Number: 201606801202