MIL000003343

•						
(Requestor's Name)						
(Address)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Submisso Links) (White)						
(Document Number)						
Certified Copies Certificates of Status						
Constitution to Filtry Office						
Special Instructions to Filing Officer:						
,						





500284684405

04/21/16--01021--013 **155.00



J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations

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:

INSPIRED PROPERTY SOLUTIONS TEAM, C

2875 ASHTON ROAD SUITE

Catherine inspired property solutions team.com

E-mail address/(to be used for future annual report notification)

For further information concerning this matter, please call:

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:

#125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status

\$155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy

5898

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS

• •		IN FLORIDA			}
	TION 605.0902, FLORIDA STATŪTI ISINESS INTHE STATE OF FLORIL		UBMITTED TO REGISTER A FO	REIGN LIMITED.	LIABILITY
	D PROPERTY SO		EAN IIC		
(Name of Fore	ign Limited Liability Company; m	rust include "Limited Liab	ility Company," "L.L.C.," or "I	LC.")	1
					1
(If name unavailable, enter al: Liability Company," "L.L.C,"	ternate name adopted for the purpo "or "LLC.")	out of transacting business	in Florida. The alternate name	musi include "Lim	lited
2. NEVADA		3.			
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)		
4					
	(Date first transacted busing (See sections 605.0904 & 605.0004 &			7 () () () () () () () () () (<u> </u>
s. 4770 S.	FORT APACHE	RD., SUIT	E 300	on m	
LAS VEGA	FORT APACHE 45, NV 89147 (Street Address o	- 2944	•	15	Ö
	(Street Address o	f Principal Office)		1. 1	-
6. 2875	ASHTON ROAD	SUITE &	0304	······································	P 17.
	14, FL 3427			ا دریک	5 .17
	(Mastin	g Address)		3.7	
7. Name and street address	ss of Florida registered agent: ((P.O. Box NOT accept	able)	Ĭ.r-	
Name:	Business Filings Incorpo	orated	<u>.</u>		
Office Address:	1200 South Pine Island	Road	_		
	Plantation		Florida 33324		
99 1 4	(City)		, Florida 33324 (Zip code)	j	
Registered agent's accept Having been named as re	rtance: egistered agent and to accept s	ervice of process for th	e above stated corporation t	at the place desig	(nated in
this application, I hereby	accept the appointment as reg statutes relative to the proper (distered agent and agree	e to act in this capacity. I fi	urther agree to	onipty
the obligations of my posi		ини сопфієзу регуоти	ince of my annes, and x am	jumitus with an	o accept
В	10000 All 1	torant S	ecretaria		
	(Regist	tered agent's signature)	anary		
8. The name, title or caps	acity and address of the person	(s) who has/have author	ity to manage is me.		
CATHERINE	E BODUROW, M	ANAGER	. A 45-47-		
2875	ASHTON RO	AD SUI	TE 20304		
SARASOTA	45HTON RO FL 34276				
	•				
	e of existence, no more than 90 of which it is organized. (If the				
of the translator must be s	submitted)	0			
	Cather	ine Bolura	py	_	
	Signat	ure of an suthorized perso	a		
This document is executed submitted in a document to	d in accordance with section 60 to the Department of State cons	05.0203 (1) (b), Florida	Statutes. I am aware that any	false information	n
		RINE BOT			
			<u>-1</u>	-	

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, **INSPIRED PROPERTY SOLUTIONS TEAM, 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 23, 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 21, 2016.

Bullara K. Cegarske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160121-2110
You may verify this electronic certificate
online at http://www.nvsos.gov/