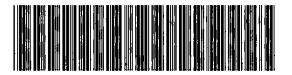
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificate	es of Status		
Special Instructions to Filing Officer:				





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SECRETARY OF STATE
PALLAHASSEF FI DOIN

J. HARRIS

TALLAHASSEE, FI ORIG.

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Awesome	Home S	OLUTIONS Limited Liability Company	LLC
·	Name of I	Limited Liability Company	
			insact Business in Florida," Certificate of company to transact business in Florida
Please return all correspondence conce	erning this matter to the	following:	
ARNOL	DJ. L.	IBET	
	Na	me of Person	
	Fi	rm/Company	
1852	ROCKFORD	ROAD	
	^	Address	
BOYNTO	J BEACH,		472
	City/ S t	ate and Zip Code	
ARNIE CA	DAWESOM mail address: (to be used	E/fOME SOLL for future annual report not	ification)
For further information concerning thi	s matter, please call:		
ARNOCO J. Name of Co	LIFSET Ontact Person	at (<u>56/</u>) <u>46</u> Area Code Day	3-4007 time Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301
	amount: \$130.00 Filing Fee & ertificate 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 **PLOCAL DELL'ASCE WITTER SECTION 605 0002 FLORIDA STATITIES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		LIMITE	D LIABILTI
1. Hwesome Home Solutions, LLC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or	"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.")			imited
2. NEVADA (Jurisdiction under the law of which foreign limited liability company is organized) 3. 81-2084787 (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. 7852 ROCKFORD ROAD	_		
(Street Address of Principal Office)	-		
0.	TALL	<u>क</u>	4- (* 2 t
(Mailing Address) 7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	AHASS	<u> </u>	u u omester omesse
Name: ARNOCO J. CIFSET	16"1" (11 C) (11 T)	<u> </u>	S W H
Office Address: 7852 ROCKFORD NOW	STAI LOR	2: 3	
BOYNTON BISHELT, Florida 3347 (City), Florida (Zip code)	2 ē™	ယ	
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I with the provisions of all statutes relative to the proper and complete performance of my duties, and I and the obligations of my position as registered agent.	further ag	gree to	comply
(Registered agent's Agnature)	-		
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: ARNOLO J. LIEST, MANNOCK		_	
		-	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having jurisdiction under the law of which it is organized. (If the sertificate is in a foreign language, a translation of the translator must be submitted)			
Signature of an autiforized person This document is executed in accordance with section 605 0203 (1) (b). Florida Statutes, Lorn aware that an	u falaa :~4	`armati =	ın.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that an submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817	y taise int '.155, F.S.	ormatio	11
Typed or printed name of signee	7		

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, **AWESOME 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 March 31, 2016, and is in good standing in this state.

SENI OF THE

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 25, 2016.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160425-2321
You may verify this electronic certificate
online at http://www.nvsos.gov/