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COVER LETTER

TO:

Registration Section

Division of Corporation	ns		
SUBJECT: FL	Homz LL Name of	<u> </u>	
	Name of	Limited Liability Company	
The enclosed "Application by For	reign Limited Liability Comp	oany for Authorization to Tra	ansact Business in Florida," Certificate of y company to transact business in Florida
Please return all correspondence	concerning this matter to the	following:	
DIA	JE GOSE		
	N	ame of Person	
- '		irm/Company	
1978	PEPPERHILL	CT	
		Address	
MIDOL	EBURG, FL	3206 tate and Zip Code	8
roberta	E-mail address: (to be used	Fmar L. Com d for future annual report no	tification)
For further information concerning			
DIANE G	os E	at (<u>484</u>) <u>35</u> Area Code Day	-6-4308 vtime Telephone Number
MAILING ADDRESS: Division of Corporations			Γ ADDRESS: of Corporations
Registration Section	•		ion Section
P.O. Box 6327		Clifton B	
Tallahassee, FL 32314			ecutive Center Circle see, FL 32301
Enclosed is a check for the follow	ving amount:		
\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate 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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIAB COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
I FL HOMZ 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 must include "Limited Liability Company," "L.L.C." or "LLC.")
2. NEVATA (Jurisdiction under the law of which foreign limited liability 3. 81-28/9336 (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 1918 TESPERHIII CI MIAGIEDURGIE SZUBB
1978 PEPPERHILL CT Middleburg FL 32068 (Street Address of Principal Office) (1978 PEPPERHILL CT Middleburg FL 32068 (Street Address of Principal Office)
6.19.78 PEPPERHILI et Middleburg FL 32068
ALSO ALL ALL ALL ALL ALL ALL ALL ALL ALL AL
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: DIANE GOSE
Office Address: 1978 PEPPERHILL CT
Minolehura, Florida 32068
(City) (Zip code)
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated
his application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply vith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and acc
the obligations of my position/as registered agent.
Man Jose
(Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
DIANE GOSE MNGC
1978 PepperHill CT MIDDLEBURG FL 32068
DIANE GOSE MNG/ 1978 PEPPERHILL CT MIDDLEBURG FL 32068 ROBERT GOSE MNGT (SAME)
O. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the urisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under on the translator must be submitted)
Maro

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

DIANE GDSE

Typed or printed name of signee

Signature of an authorized person

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, **FL HOMZ 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 May 20, 2016, 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 June 2, 2016.

Barbara K. Cegavske
BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate

Certificate Number: C20160602-2494 You may verify this electronic certificate online at http://www.nvsos.gov/