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SECRETARY OF STATE

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COVER LETTER

TO:

TO:	Registration Section Division of Corporation	ons						
SUBJE	R NATION HOM	ES, LLC						
		Name of	Limited Liability	Company				
Existen	ice, and check are submit	oreign Limited Liability Comted to register the above refer	renced foreign lim	ation to Tr ited liabilit	ansact Business in Flor y company to transact	rida," Cert business i	ificate n Flori	of da
. Piense i	return all correspondence	concerning this matter to the	e tottowing:				•	
	Richard Raus	ch,						
		Ŋ	lame of Person					
		F	irm/Company					
	2987 S.W. Su	nset Trace Cir			•			
			Address			V I	<u></u>	
	Palm City FL	34990				ECR	e e	
			State and Zip Code				Ħ	TI
		•	state and 21p Code	•		SSE	<u></u>	厂
	rrausch 12@gm	ail.com				三二		Ш
		E-mail address: (to be use	d for future annua	report no	tification)	54	4	
For furt	her information concerni	ng this matter, please call:					1: 21	
	Richard Rausch,		919 at (522-99	93			
	Name	of Contact Person	Area Code	Day	time Telephone Numb	er		
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section suilding secutive Center Circle see, FL 32301			
Enclose	d is a check for the follow	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Fili Certified Copy	_	☐ \$160.00 Filing Fe of Status & Certified		ale	

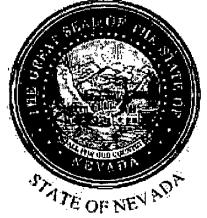
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

Liability Company," "L.L.C,	ternate name adopted for the purpose of transacting "or "LLC.")	business in Florida. The alternate nam	e must includ	e "Lim	iled
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 Florida, if (See sections 605.0904 & 605.0905, F.S. to de	prior to registration.) etermine penalty liability)			
5. 2987 S.W. Sunset Trac	e Cir Palm City FL 34990		- i		
			AE(Ö	
	(Street Address of Principal Office)	· 室室	يي	
6		•	52	7	
, ———			SEC	$\overline{\omega}$	
	(Mailing Address)				
7. Name and street address	s of Florida registered agent: (P.O. Box NOT	accentable)	95	*******	
	Business Filings Incorporated	,	SH.	2	
Name:	1200 South Pine Island Road		-		
Office Address:	1200 South Fine Island Road	·			
	Plantation	, Florida 33324 (Zip code)	_		
Registered agent's accept	(City)	(Zip code)			
this application, I hereby	gistered agent and to accept service of process accept the appointment as registered agent an statutes relative to the proper and complete pertion as registered agent.	id agree to act in this capacity. I fi informance of my duties, and I am	urther agree	e to co	mply
23					
<u> </u>	(Registered agent's signat	V '			
•	city and address of the person(s) who has/have	authority to manage is/are:			
•	-	authority to manage is/are:			
•	city and address of the person(s) who has/have	authority to manage is/are:			
•	city and address of the person(s) who has/have	authority to manage is/are:			
Richard Rausch, Manager 9. Attached is a certificate jurisdiction under the law of	of existence, no more than 90 days old, duly audit of which it is organized. (If the certificate is intibulity)	authority to manage is/are: 990 uthoriticated by the official having of a foreign language, a translation of	custody of re the certifica	cords i	in the er oath
Richard Rausch, Manager 9. Attached is a certificate jurisdiction under the law of the translator must be su	city and address of the person(s) who has/have 2987 S.W. Sunset Trace Cir Palm City FL 34 of existence, no more than 90 days old, duly autof which it is organized. (If the certificate is into itimitted) Signature of an authorized	authority to manage is/are: 990 Other ticated by the official having of a foreign language, a translation of d person	the certifica	te und	in the er oath
Richard Rausch, Manager 9. Attached is a certificate jurisdiction under the law of the translator must be su This document is executed	of existence, no more than 90 days old, duly audit of which it is organized. (If the certificate is intibulity)	authority to manage is/are: 990 othericated by the official having of a foreign language, a translation of d person lorida Statutes. I am aware that any	the certifica	te und	in the er oath

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, **R NATION HOMES, 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 June 2, 2016, and is in good standing in this state.



Electronic Certificate
Certificate Number: C20160610-1687
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 June 10, 2016.

BARBARA K. CEGAVSKE
Secretary of State

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