m16000006209

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer: Cert WIV-48384						

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S Warren SEP 0 4 2016



July 12, 2016

KEVIN DILAURI 10232 SANDY MARSH LANE ORLANDO, FL 32832

SUBJECT: NEXT GENERATION HOME SOLUTIONS, LLC

Ref. Number: W16000048384

We have received your document for NEXT GENERATION HOME SOLUTIONS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren Regulatory Specialist II

Letter Number: 216A00014582

COVER LETTER

Registration Section

TO:

Div	ision of Corporation	S						
SUBJECT:	NEXT GENERATION HOME SOLUTIONS, LLC							
		Name of Limited Liability Company						
		eign Limited Liability Compa I to register the above referer						
Please return	all correspondence co	oncerning this matter to the f	ollowing:					
•		KEVIN DILAURI						
	Name of Person							
	NEXT GENERATION HOME SOLUTIONS, LLC							
	Firm/Company							
10232 Sandy Marsh Lane								
	Address							
	ORLANDO FL 32832							
	City/State and Zip Code							
	kevin.dilauri@gmail.com							
		E-mail address: (to be used	for future annual	report noti	fication)			
For further in	nformation concerning	this matter, please call:						
KI	EVIN DILAURI		321	276 928	88			
	Name of	f Contact Person	Area Code	Day	time Telephone Number			
Div R e g P.O	ision of Corporations istration Section . Box 6327 ahassee, FL 32314			Division of Registratic Clifton Br 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301			
	check for the following fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin	ig Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop			

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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

COMPANY TO TRANSACT BU	ISINESS IN THE STATE OF FLORIDA:		
NEXT GENERATION	N HOME SOLUTIONS, LLC		
(Name of Fore	eign Limited Liability Company; must in	nclude "Limited Liability Company	," "L.L.C.," or "LLC.")
Liability Company," "L.L.C,		f transacting business in Florida. Th	e alternate name must include "Limited
2. NEVADA		3.	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number	r, if applicable)
4	(Date for the second live)		
	(See sections 605.0904 & 605.090	in Florida, if prior to registration.) 05, F.S. to determine penalty liabilit	ty)
510232 Sandy Mar	sh Lane		
ORLANDO FL 32			
	(Street Address of Prin	scipal Office)	7.1
510232 Sandy Mars	sh Lane		
ORLANDO FL 328	132		
	(Mailing Add	iress)	88 W
7. Name and street addres	s of Florida registered agent: (P.O.	Box NOT acceptable)	
	BUSINESS FILINGS INCORPOR		E STA
Name:			
Office Address:	1200 SOUTH PINE ISLAND RO.	>	
	PLANTATION	, riorida	324
D (-4 34)	(City)		(Zip code)
this application. I hereby	gistered agent and to accept service accept the appointment as registere statutes relative to the proper and c	ed agent and agree to act in this	l corporation at the place designated is capacity. I further agree to comply ties, and I am familiar with and accep
₽	(8	asst Scretar ent's signature)	(1)
8. The name, title or capa	acity and address of the person(s) wh	ho has/have authority to manage	is/are:
KEVIN DILAURI, MA	NAGER 10232 Sandy Marsh Lar	ne ORLANDO FL 32832	
RUTHANN DILAURI,	MANAGER 10232 Sandy Marsh I	Lane ORLANDO FL 32832	<u> </u>
9. Attached is a certificate jurisdiction under the law of the translator must be so	of which it is organized. (If the certi-	old, duly authenticated by the of ificate is in a foreign language, a	fficial having custody of records in the translation of the certificate under oat
	Signature of	an authorized person	
	Ü	•	
This document is executed submitted in a document to	d in accordance with section 605.020 the Department of State constitutes	15 (1) (b), Florida Statutes. I am s a third degree felony as provide	aware that any raise information ed for in s.817.155, F.S.

KEVIN DILAURI

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, NEXT GENERATION 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 May 11, 2016, and is in good standing in this state.

GEAL OF THE OF

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 26, 2016.

BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate
Certificate Number: C20160526-2303
You may verify this electronic certificate
online at http://www.nvsos.gov/