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(Re	questor's Name))
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(Cit	ty/State/Zip/Phor	ne #)
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1. HARRIS

COVER LETTER

TO:		istration Section ision of Corporation	S				
SUBJE	CT:		ERTY VENTURES, LLC				
			Name of L	imited Liability C	ompany		
			eign Limited Liability Comp d to register the above refere				
Please re	eturn	all correspondence c	oncerning this matter to the	following:			
		Nicholas T. Spa	ıu				
		•	Na	me of Person			
LIMITLESS PROPERTY VENTURES, LLC Firm/Company							
		592 SE 15 Ave					
				Address			•
		Deerfield Beach	h FL 33441				
		· · · · · · · · · · · · · · · · · · ·	City/Si	ate and Zip Code			•
		ntscon@bellsout	h.net				
		· 	E-mail address: (to be used	for future annual	report not	ification)	
For furt	her ir	formation concerning	g this matter, please call:				
	Nic	holas T. Spau		954 _ at (0915	
		Name o	f Contact Person	Area Code	Day	time Telephone Number	•
		JLING ADDRESS: ision of Corporations				ADDRESS: of Corporations	
		istration Section . Box 6327			Registrati Clifton B	ion Section	
		ahassee, FL 32314			2661 Exe	ecutive Center Circle see, FL 32301	
Enclose	d is p	check for the follow	ing amount:				
	*	125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g Fec &	□ \$160,00 Filing Fee, C of Status & Certified Co	

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

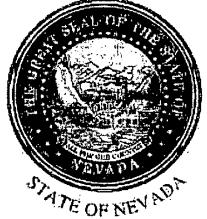
IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

	ign Limited Liability Company; must include "I	anned Liability Company, E.C.C., or	142.)		
If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transact	ing business in Florida. The alternate nan	e must inc	clude "I.	imited
2. Nevada	3				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)			
J	(Date first transacted business in Florid	n, if prior to registration.)	-		
592 SE 15 Ave Deerfie	(See sections 605.0904 & 605.0905, F.S. teld Beach FL 33441	to determine penalty.[[ability]			
·			-		
V-1.	(Street Address of Principal Of	lice)	-		
5			Ā	<u>۔</u> دی	
	(Mailing Address)			20%	
7. Name and street addres	s.of Florida registered agent: (P.O. Box N	OT acceptable)	25	CD.	1 T #
Name:	Business Filings Incorporated			120	111
Office Address:	1200 South Pine Island Road	**	- 유당 	Ö	
	Plantation	, Florida 33324	_ 을급	ص ص	
	(City)	(Zip code)	729		
		ness for the chave stated appropriation	at the al	ara des	ionated
Having been named as rethis application, I hereby with the provisions of all the obligations of my positive abligations of the obligations of the beautiful and the beautiful	gistered agent and to accept service of pro accept the appointment as registered agen statutes relative to the proper and complete	t and agree to act in this capacity. I ge performance of my duties, and I and	further a	gree to	comply
Having been named as rethis application, I hereby with the provisions of all the obligations of my positive obligations of my positive. 8. The name, title or capa Nicholas T. Spau Mgr 59:	gistered agent and to accept service of pro accept the appointment as registered agen statutes relative to the proper and complete ition as registered agent. (Registered agent's signacity and address of the person(s) who has/h	t and agree to act in this capacity. I ge performance of my duties, and I and	further a	gree to	comply
this application, I hereby with the provisions of all the obligations of my positive obligations of the obligation	gistered agent and to accept service of proaccept the appointment as registered agent statutes relative to the proper and complete ition as registered agent. (Registered agent's signacity and address of the person(s) who has/haz SE 15 Ave Deerfield Beach FL 33441	t and agree to act in this capacity. I ge performance of my duties, and I and	further a	gree to	comply

Typed or printed name of signee

Nicholas T. Spau Mgr

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Sccretary 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, LIMITLESS PROPERTY VENTURES, 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 July 13, 2016, and is in good standing in this state.

STAL OF THE STATE OF THE STATE

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 27, 2016.

Bouliars K. Cegewske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160727-2577
You may verify this electronic certificate
online at http://www.nvsos.gov/