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Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : SPIEGEL & UTRERA, P.A.
Account Number : FCA000000001
Phone : (305) 854-6000
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**Foreign Limited Liability Company
CASABELLA RENTALS LLC**

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Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
HI6000263849 3 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:

1. CASABELLA RENTALS 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. MISSISSIPPI
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FBI number, if applicable)

4. UFON FILING
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7 County Road, #282
Iuka, Mississippi 38852
(Street Address of Principal Office)

6. 7 County Road, #282
Iuka, Mississippi 38852
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: SPIEGEL & UTRERA, P.A.
Office Address: 1840 SW 22nd Street, 4th Floor
Miami, Florida 33145
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: SPIEGEL & UTRERA, P.A.
[Signature] NANCIA UTRERA - Vice President
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Scotty Casabella - Managing Member - 7 County Road, #282, Iuka, Mississippi 38852
Patti H. Casabella - Managing Member - 7 County Road, #282, Iuka, Mississippi 38852

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]
Signature of an authorized person

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.

HI6000263849 3 Scotty Casabella, Managing Member
Typed or printed name of signer

16 OCT 25 AM 8:57



DELBERT HOSEMANN
Secretary of State

Office of the Secretary of State
Jackson, Mississippi

Certificate of Good Standing

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify:

CASABELLA RENTALS LLC

Registered the 22nd day of September, 2016

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

7 County Road 282
Iuka, MS 38852

And that the registered agent at that address is:

Scotty Casabella

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office, and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office
the 20th day of October, 2016

C. Delbert Hosemann, Jr.

C. DELBERT HOSEMANN, JR.
Secretary of State

Certificate Number: CN16029262

Verify this certificate online at <http://corp.sos.ms.gov/corpcnv/verifycertificate.aspx>