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## COVER LETTER .

TO: Registration Section Division of Corporations
SUBJECT: AWESOME TWOST MENTS, LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
ARNOLD J. LIFSET  Name of Person
Firm/Company
1852 ROCKFORD RD
BOYN TON BEACH, FL 33472  City/State and Zip Code
PRNIC (D) AINTSOMEHOME SOLUTIONS LLC, COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PRNOLD J. LIFSET at (56) 463-4007  Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Boxed{125.00}\$ \text{ Filing Fee}  \$\subset \$\subset \$\subset\$ \$\subset

## APPLICATION BY FOREIGN L'IMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A F COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "		LIABILITY
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name Liability Company," "L.L.C," or "LLC.")  2.	e must include "Limi	ited
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)  5. 2852 ROCK FORD NOTED  (Street Address of Principal Office)  (Street Address of Principal Office)	NOV 3E	
(Mailing Address)  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:   Office Address:   BAYNTON BETCH, Florida 3347	8 PH I2: 38	77 7
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liabilities designated in this application, I hereby accept the appointment as registered agent and agree to act in this to complywith the provisions of all statutes relative to the proper and complete performance of my duties, accept the obligations of my position as registered agent.  (Registered agent's signature)  8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	s capacity. I furth	er agree
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having constraints of the translator must be submitted  Signature of an authorized person		
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.  ACNOLD T. LIFSET  Typed or printed name of signee	false information 155, F.S.	

SECRETARY OF STATE



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## 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, AWESOME INVESTMENTS, 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 March 31, 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 November 10, 2016.

echana K. Cegovske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20161110-1659
You may verify this electronic certificate
online at http://www.nvsos.gov/