

### Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017

: (800)345-4647

Phone Fax Number

: (800) 432-3622

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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#### Foreign Limited Liability Company HOMESTEAD LOG HOME BUILDERS LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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Corporate Filing Menu

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#### COVER LETTER

TO:	- T	ion Section of Corporation	15					
SUBJE	ECT:	HO MES	TEAD L	ole Hor	Mes Buil DisA of Limited Liability	s LL		
•				Name o	f Limited Liability	Company:		<del></del> -
The end	closed "App ice, and che	lication by For ok are submitte	eign Limited L d to register th	iability Cor e above refe	mpany for Authoriz erenced foreign lim	ation to Tri ited liabilit	nsact Business in Florid y company to transact bu	a," Certificate of siness in Florida
Please	return all co	rrespondence c	oncerning this	matter to th	re following:	win 'i		
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		Name:0	Contact Person	<b>T</b> D	Area Code	Day	time Telephone Number	
		ADDRESS:					ADDRESS:	
		f Corporations					of Corporations.	
	Registration P.O. Box 6						on Section	
		6. FL 32314				Clifton B	uneing cutive Conter Circle	
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Enclose	d is a check	for the followi	ng amount:					
	□ \$125.00	Filing Fee	□ \$130,00 Fi	~	🗆 \$155.00 File	ng Eos &	□ \$160.00 Filing:Fee,	Certificate
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# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SEC COMPANY TO TRANSACT BU	TION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECEISTER A FOR SINESS IN THE STATE OF FLORIDA:	FIĞN LIM	OTTED LÜBÜLTY
1. Home-	STEAD Lote Along SudDERS 161		
(Name of Fore	5 Tend Lolo Home Burlock's LLC.  Sign Limited Liability Company; must include "Limited Liability Company," "LLC;" or "LLC."	<u> </u>	<del></del>
(If name unavailable, enter all Liability Company," "LLC,"	ternate name adopted for the purpose of transacting business in Florida. The alternate name many or "LLC.")	as include	"Limited
2. (Iurisdiction under the law company is organized)	of which foreign limited liability  3. 2111 -8-526-0  (FEI number, if applicable)		
4.	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
.5		===	
**************************************	73 PINE DRIVE THAYNE LUYOMING (Street Address of Principal Office)  P.O. Box 1116	Bei I	
6	(Street Address of Principal Office)  P.O. Box 1116		•
	THAYDE, Ly. 83129		ED
	, o		_
7. Name and street address	s of Florida registered agent: (P.O. Box. NOT acceptable)	1 5	
Nume:	Capitol Corporate Services, Inc.		
Office Address:	155 Office Plaza Dr., Ste A		
	Tallahassee Florida 32301 (City) (Zip.oode)		
designated in this applicate to complywith the provision	tance: gistered ugant and to accept service of process for the above stated limited liability of the above stated limited liability of the appointment us registered agent and agree to act in this capus of all statutes relative to the proper and complete performance of my duties, and my position as registered agent.  Krista Ali, Asst Secretary of Capitol Corporate Service	pacity. I I em fa	further agree miliar with and
	(Registered agent's signature)	1	•
Ra	with and address of the person(s) who has/have authority to manage is/are:	: :	
	S HINE DR / PLOS SUR ING		
	THAYNE LY. 83127		
9 Attached is a certificate	of existence, no more than 90 days old, duly authenticated by the official having cust of which it is organized. (If the certificate is in a foreign language, a translation of the	ody of rec certifical	cords in the
This document is executed submitted in a document to	in accordance with section 605,0203 (1) (b), Florida Statutes. I am aware that any fair the Department of State constitutes a third degree felony as provided for in a 817.15	se inform ; F.S.	ation
	DOLORES COOVER		
	Typed or printed name of signoc		

## STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

# Homestead Log Home Builders LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on February 26, 2003, comply with all applicable requirements of this office. This entity has been assigned entity identification number 2003-000447118.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 6th day of April, 2017 at 11:26 AM. This certificate is assigned 022714121.



Secretary of State

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Notice: A certificate issued electronically from the Wyeming Secretary of State's web site is immediately valid and affective: The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.