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D. SCOTT APR 12 2017

COVER LETTER

TO:

Registration Section

Division of	Corporations				
SUBJECT:	R	E HOME Name of Limited	SOW TO	us, uc	
	cation by Foreign Limited L	iability Company for .	Authorization to Tra	ansact Business in Florida," Certific y company to transact business in Fl	
Please return all corr	espondence concerning this	matter to the followin	g:		
	ALEJA	NDRO Z.	TOMADin	<u> </u>	
_		Firm/Com	pany		
	ALX-	Addres DAUE FL City/State and	33009 Zip Code GMAIL. CO	ALLSSEE FLORD	FILED
D 6 1 1 6		ss: (to be used for futu	ire annual report no	inication)	
ALEJA MAILING	327	3	rea Code Day STREET Division Registrat Clifton B 2661 Exe	rtime Telephone Number T ADDRESS: of Corporations ion Section suilding ecutive Center Circle see, FL 32301	
Enclosed is a check:	for the following amount: Filing Fee		5.00 Filing Fee & ied Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	;

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: 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.") **NEVADA** (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: ___ , Florida <u>53</u> 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 complywith 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. <u>Junnellasules Cae</u>
(Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 1250 E. HALLANDALE 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 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.

AVEJANDO R. TOMADIN

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, **RE 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 March 24, 2017, 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 April 4, 2017.

BARBARA K. CEGAVSKE Secretary of State

Schora K. Cegevste

Electronic Certificate
Certificate Number: C20170404-2096
You may verify this electronic certificate
online at http://www.nvsos.gov/