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COVER LETTER

TO: Registration Section Division of Corporation	ns
SUBJECT:	BACY Homevestments, LLC Name of Limited Liability Company
	eign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of d to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence	concerning this matter to the following:
	Kevin Melendez Name of Person
	LEBACY Homevertments, UC Firm/Company
	1112 NE 39 AVE Homestead 2
	Howestead th. 33033 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further information concerning	g this matter, please call:
Jonathan Name o	Conject Person at (818) 370 - 8517 Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the follow \$125.00 Filing Fee	ing amount: \$\Boxed{\Pi}\$ \$130.00 \text{ Filing Fee & } \Boxed{\Pi}\$ \$155.00 \text{ Filing Fee & } \Boxed{\Pi}\$ \$\$160.00 \text{ Filing Fee, Certificate } \text{ Certified Copy } \text{ 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 LIABILIT COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. LEGACY Homevestment, 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. Nevada 3. 46-3939505 (Jurisdiction under the law of which foreign limited liability company is organized) 3. (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.
5550 OWENSMOUTH AVE # 123 Woodland (Street Address of Principal Office) Hills CALifornia 91367
SAME AS Above (Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Kevin Melendez
Office Address: 1112 NE 39 AVE Howestead , Florida 33033 (Zip code)
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation 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.
(Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Onathan L. Peyer - Manager Patricia Kaniowski - Manager
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) Senature 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. Over the Cyped 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, **LEGACY HOMEVESTMENTS**, **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 September 27, 2013, 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 March 9, 2017.

BARBARA K. CEGAVSKE Secretary of State

Souhara K. Cegarste

Electronic Certificate
Certificate Number: C20170309-1636
You may verify this electronic certificate
online at http://www.nvsos.gov/