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(Re	equestor's Name)							
(Ad	ldress)							
(Address)								
(City/State/Zip/Phone #)								
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies	of Status							
Special Instructions to Filing Officer:								





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TALLAHASSEE FI ORION

WALLARDEN STORY

COVER LETTER

TO:

Registration Section
Division of Corporations

LUIHN REAL ESTATE INVESTMENTS LLC

SUBJECT:

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:

•							
Lehn E. Abrams							
Name of Person							
Arnold, Matheny & Eagan, P.A.							
Firm/Company							
605 E. Robinson Street, Suite 730							
Address							
Orlando, FL 32801							
City/State and Zip Code							
labrams@ameorl.com							
E-mail address: (to be used for future annual report notification)							

For further information concerning this matter, please call:

Lehn E. Abrams

...407

841-1550

Name of Contact Person

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 following amount:

\$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

☐ \$155.00 Filing Fee & Certified Copy

☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 9, 2017

LEHN E ABRAMS ARNOLD, MATHENY & EAGAN, PA 605 E ROBINSON STREET, SUITE 730 ORLANDO, FL 32801

SUBJECT: LUIHN REAL ESTATE INVESTMENTS LLC

Ref. Number: W17000039794



We have received your document for LUIHN REAL ESTATE INVESTMENTS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 017A00009181

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tollahassas Florida 2001.

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE 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:

Ι.,	Luihn Real Estate In (Name of Foreign	vestments LLC Limited Liability Company; must include "Limited	Liabili	y Company," "L.L.C.," or "LLC.")			
(If n	ame unavailable, enter alternate as	ome adopted for the purpose of transacting business in Flor	da. The a	alternate name must include "Limited Li	ability Comp	oany,""L.L.C,"	or "LLC.")	
2. <u>l</u>	North Carolina (Junisdiction under the law of rel	uch foreign limited liability company is organized)	3	(FEI nun	ber, if apple	enble)		
4.				a de la contractiva del la contractiva del la contractiva de la co				
		(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605 0905, F.S. to determine						
5. 2950 Gateway Cen				2950 Gateway Centre Blvd.			<u>~2</u>	
	(Street Address of P Morrisville, NC 2756			(Mailing Ad Morrisville, NC 27560-		SEC		7
						至高	XVA	
7.		of Florida registered agent: (P.O. Box	<u>NOT</u>	acceptable)		ASSEE F	18 PH	
	Name:					10.00	<u> </u>	4 . y
	Office Address:	605 E. Robinson Street, Suite 730		<u> </u>		10A	ų: 3 6	
		Orlando		, Florida 32801		-		
		ions of all statutes relative to the proper s of my position as registered agent. (Registered agent's s	Ø	75				
8.	8. The name, title or capacity and address of the person(s) w <u>Title or Capacity:</u> Name and Address:		has/have authority to manage is/are: <u>Title or Capacity:</u>		Name and Address:			
	Manager	Sandra Luihn-Argay	ŗ	Member	Jan	nes S. Luil	hn	
		2950 Gateway Centre Blvd				lowsy Centre Blvd		
		Morrisville, NC 27560	•		Morriev	Me. NC 27550		
Member		Allan J. Luihn		Member		Cynthia L. Toma		
		2950 Gateway Centre Bryd Mornsylle, NC 27560				2950 Gateway Centra Blvd Mortisvitle, NC 27560		
		NOTIBER N. N. 2700V	-					
(L	Ise attachments if neces	sary)						
jur	Attached is a certificate is diction under the law the translator must be so	of existence, no more than 90,days old, of which it is organized. (If the certificate ubmitted) Lundle Lunds Signature	is in	a foreign language, a transla	aving cu tion of ti	istody of rec he certificat	cords in t te under c	he oath
10 sul	. This document is execomitted in a document to	uted in accordance with section 605.0203 the Department of State constitutes a thi	(1) (b rd deg), Florida Statutes. I am awa ree felony as provided for in	re that a	ny false info 55, F.S.	ormation	

Typed or printed name of signee

Sandra Luihn-Argay



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

LUIHN REAL ESTATE INVESTMENTS LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 28th day of May, 2008, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 3rd day of May, 2017.

Elaine I. Marshall

Secretary of State

Certification# 100573170-1 Reference# 13823369- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification