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COVER LETTER

| Division of Corporations | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| SUBJECT: LPS CAPITAL HOLDINGS 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: | | |
| HOWARD PPER Name of Person | | |
| LPS CAPITAL HOLDINGS LLC Firm/Company | | |
| 9511 N HOLLYBROOK LAKE DR WIT 10-305 Address | | |
| PEMBROKE PINES FL 33025 City/State and Zip Code | | |
| E-mail address: (to be used for future annual report notification) | | |
| For further information concerning this matter, please call: | | |
| Howard Piper at 954 290 8874 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: #\$125.00 Filing Fee \$\Bigcup \$130.00 Filing Fee & Bigcup \$155.00 Filing Fee & Certificate of Status Certified Copy CHK # 132 Certificate of Status Certified Copy | | |



May 23, 2017

HOWARD PIPER LPS CAPITAL HOLDINGS LLC 9511 N HOLLYBROOK LAKE DR, UNIT 10-305 PEMBROKE PINES, FL 33025

SUBJECT: LPS CAPITAL HOLDINGS LLC

Ref. Number: W17000043488

We have received your document for LPS CAPITAL HOLDINGS 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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Michelle Milligan Senior Section Administrator

Letter Number: 117A00010259

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: |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. LPS CAPITAL HOLDINGS 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. STATE OF NEVADA (Jurisdiction under the law of which foreign limited liability company is organized) 3. 82-1265327 (FEI number, if applicable) |
| 4. N/A |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) |
| 5. 9511 N. HOLLYBROOK LAKE DRIVE UNT 10-805 |
| PEMBROKE PINES, FL 33025. (Street Address of Principal Office) |
| 6 701 S. CARSON ST STE ZOO |
| CARSON CITY NEVADA 89701 |
| 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) |
| HOWARD DIPER |
| Office Address: 9511 N. HOLLYBROOK LAKE DR. |
| Office Address: 95/1 N. HOLLYBROOK LAKE DR. PEMBROKE PINES, Florida 33025 (City) (Zip code) |
| |
| 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. |
| /////////// |
| (Registered agent's signature) |
| 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: |
| HOWARD PIPER MANAGER |
| 9511 N HOLLYBROOK LAKE DR UNIT 10-305 PEMBROKE PINES FL, 33025 |
| PEMBROKE PINES FL, 33025 |
| 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 |
| 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. |

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, **LPS CAPITAL HOLDINGS 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 April 19, 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 June 8, 2017.

Barbara K. Cegavske
Secretary of State

Electronic Certificate
Certificate Number: C20170608-1323
You may verify this electronic certificate
online at http://www.nvsos.gov/