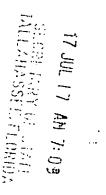
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



07/17/17--01025--018 **125.00



JUL 18 2017 J SHIVERS

COVER LETTER

	Registration Section Division of Corporation	s				
SUBJEC	T: PINPOINT PROPE					
		Name of I	imited Liability (Company		
The enclo Existence	sed "Application by Fore, and check are submitted	eign Limited Liability Comp I to register the above refere	any for Authoriza need foreign limit	tion to Tra ed liability	nsact Business in Florida," Certificate company to transact business in Flori	ot ida
Please ret	um all correspondence c	oncerning this matter to the	following:			
	Rayn D. Smit					
		Na	ime of Person			
	PINPOINT PR	OPERTY SOLUTIONS, I	LLC			
		Fi	rm/Company			
	7272 PAPAY	A WAY				
	<u>, </u>	<u> </u>	Address			
	TAMARAC FL	33321				
	171107101072		ate and Zip Code		<u> </u>	
	raynsmith01@gr	nail.com				
		E-mail address: (to be used	for future annual	report not	ification)	
For furthe	er information concerning	this matter, please call:				
·	Rayn D. Smith		at (954	, 668-6	184	
_	Name of	Contact Person	Area Code	Day	time Telephone Number	
] 	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahussee, Ft. 32314			Division of Registratic Clifton B 2661 Execution 26	ADDRESS: of Corporations ion Section uilding cettive Center Circle ee, FL 32301	
	is a check for the following \$125.00 Filing Fee	ng amount: □ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ng Fee &	☐ \$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 POLLOWING IS SUBMITTED TO REGISTER A POREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited ability Company," "L.L.C." or "LJ.C.") Newda Newda	,	ign Limited Liability Company; must include "L	.imited Liability Company," "L.L.C"	or "LLC.")
(City) Registered agent's acceptance: Author City City			ing business in Florida. The alternate r	name must include "Limited
(Street Address of Principal Office) (Street Address) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name. Registered Agents Inc. Office Address: 3030 N. Rocky Point Dr. STE 150A Tampa (City) (City)				
(Bate first transacted business in Florida, if prior to registration.) (See sections 603.0904 & 605.0905, F.S. to determine penalty finishility) 7272 PAPAYA WAY TAMARAC FL 33321 (Street Address of Principal Office) (Mailing Address) (Mailing Address) Name and street authless of Florida registered agent: (P.O. Box NOT acceptable) Name. Registered Agents Inc. Office Address: 3030 N. Rocky Point Dr. STE 150A Tampa Florida 33607 (City) (City) Registered agent and to accept service of process for the above stated in this capacity. I further age complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with a complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent. (Registered agent's signature) Rayn D. Smith Mgr 7272 PAPAYA WAY TAMARAC FL 33321 Melissa Smith Mgr 7272 PAPAYA WAY TAMARAC FL 33321 Attached is a certificate of existence, no more than 90 days old, duty authenticated by the official having custody of records in the unisdiction under the law of Whith the complete certificate is in a foreign language, a translation of the certificate under on the translator must be submitted) Signature of an authorized person		of which foreign limited liability	(FEI number, if applicat	ole)
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Rayn D. Smith

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, PINPOINT PROPERTY 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 May 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 July 7, 2017.

Ballons K. Cagaiste

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20170707-1496
You may verify this electronic certificate
online at http://www.nvsos.gov/