## M170000017574

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LOYALTY FORE PROPERTIES, LLC	
Name of Limite	d Liability Company
The enclosed "Application by Foreign Limited Liability Company for Existence, and check are submitted to register the above referenced to	or Authorization to Transact Business in Florida," Certificate of foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the follow	ring:
EUCLIDES MANANA	
Name of	Person
LOYALTY FORE PROPERTIES, LLC	
Firm/Co	nipany
6126 SUNNYVALE DR	
Add	ress
ORLANDO, FL 32822	
City/State ar	d Zip Code
EMANANA@OOL.COM & LONEWOL	FX5@HOTMHIL.COM
E-mail address: (to be used for f	uture annual report notification)
For further information concerning this matter, please call:	
EUCLIDES MANANA E MANANA _at(	464. 222. de23 407 <sub>/</sub> 920-5728
Name of Contact Person	Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section	STREET 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
	S155.00 Filing Fee & S160.00 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alterability Company," "L.L.C," o	rnate name adopted for the purpose of transacting busines	and a Chamble. The altermate party respect	
	or "LLC.")	ss in Fiorida. The alternate hathe must	include "Limited
NEVADA	3		
Jurisdiction under the law of company is organized)	which foreign limited hability	(FEI number, if applicable)	
	(Date first transacted business in Florida, if prior to	o registration )	
	(See sections 605.0904 & 605.0905, F.S. to determin	e penalty liability)	
6126 SUNNYVALE DE	R, ORLANDO, FL 32822		
		-	
	(Street Address of Principal Office)		
6126 SUNNYVALE DR	R, ORLANDO, FL 32822		
		٠٠٠٠	· 1
	(Mailing Address)	<u> </u>	13 7
	· -		المنتاب فأحا
Name and street address	of Florida registered agent: (P.O. Box NOT accep	table)	1.7
Name:	Registered Agents Inc.	_	· C
Office Address:	3030 N. Rocky Point Dr. STE 150A	_	
	Tampa	Florida 33607	5
-	(City)	, Florida <u>33607</u> (Zip code)	•
egistered agent's accepta	ince:		
aving been named as regi	istered agent and to accept service of process for the on, I hereby accept the appointment as registered of the contract of t	he above stated limited liability co. ovent and avere to act in this cano	mpany at the plac- icity. I further as
complywith the provision	ns of all statutes relative to the proper and complet	te performance of my duties, and i	l am familiar with
cept the obligations of m	y position as registered agent.		
	Psel Have		
-	(Registered agent's signature	)	
m da	in and address of the assessor of who has have anythe	sritu to managa islaru:	
	city and address of the person(s) who has/have autho		
JCLIDES MANANA, MAN	AGER, 6126 SUNNYVALE DR, ORLANDO, FL 328	322	
HAWN D. MANANA, MAN	NAGER, 6126 SUNNYVALE DR, ORLANDO, FL 328	322	
		<del></del>	
Attached is a certificate or risdiction under the law of the translator must be sub-	of existence, no more than 90 days old, duly authent if which it is organized. (If the certificate is in a fore bmitted)	icated by the official having custodign language, a translation of the c	ly of records in the ertificate under oa

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.

> SHAWN D. MANANA EUCLIDES MANANA

Signature of an authorized person

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, LOYALTY FORE PROPERTIES, 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 August 14, 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 August 25, 2017.

Bolling K. Cegerske

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20170825-0261
You may verify this electronic certificate
online at http://www.nvsos.gov/