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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

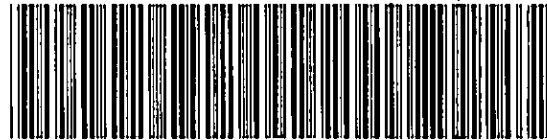
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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BMF
11/8/17

SHULMAN
ROGERS

GANDAL
PORDY
ECKER

NORA A. WHITESCARVER LEGAL ASSISTANT

November 7, 2017

VIA FEDERAL EXPRESS

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: IRES FL, LLC

Ladies and Gentlemen:

Enclosed for filing are the following documents for IRES FL, LLC:

Application by Foreign Limited Liability Company for Authorization to Transact
Business in Florida; and

A Certificate of Good Standing issued by the Virginia State Corporation Commission.

Also enclosed is a check, payable to the Florida Department of State, in the amount of
\$125.00 to cover the Filing Fee.

Please return the evidence of filing to me. I've enclosed a self-addressed envelope with a
pre-paid Federal Express Airbill.

Please contact me if additional information is needed to process this request. Thank you for
your assistance.

Sincerely,

SHULMAN, ROGERS, GANDAL,
PORDY & ECKER, P.A.

By:



Nora Whitescarver
Legal Assistant

Enclosures as noted

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: IRES FL, 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:

Nora A. Whitescarver

Name of Person

Shulman, Rogers, Gandal, Pordy & Ecker, P.A.

Firm/Company

12505 Park Potomac Avenue, 6th Floor

Address

Potomac, MD 20854

City/State and Zip Code

sean@expresshomebuyers.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nora A. Whitescarver

301

255-0545

Name of Contact Person

at (_____) _____

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

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. IRES FL, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. Virginia

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-3328052

(FEI number, if applicable)

4. Upon filing

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 6564 Loisdale Court

(Street Address of Principal Office)

Suite 215

Springfield, VA 22150

6. 6564 Loisdale Court

(Mailing Address)

Suite 215

Springfield, VA 22150

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(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 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.

Madonna Cuddihy
Assistant Secretary

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Manager

Judson M. Allen

Manager

Lawrence B. Chandler, III

6564 Loisdale Court, Ste. 215
Springfield, VA 22150

6564 Loisdale Court, Ste. 215
Springfield, VA 22150

(Use attachments if necessary)

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)

10. 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.

Signature of an authorized person

Judson M. Allen

Typed or printed name of signer

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Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That IRES FL, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is November 6, 2017; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

November 7, 2017

Joel H. Peck

Joel H. Peck, Clerk of the Commission