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(Requestor's Name) (Address) (Address)	200305616802
(City/State/Zip/Phone #)	
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COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT: HARSHMAN HOME SERVICES, 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: ANDLY HARSHULLAN Name of Person HARSHMAN HOME SERVICES, LLC Firm/Company 9550 ST. CHRISTINS CT SULVANIA, OH 43560 City/State and Zip Code HHJERVICESO BEX. NET HHJERVICESO BEX. NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

ANDY HARSHMAN Name of Contact Person at (419) 276-3413 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 & \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy

HI JENNA, HOREFULLY THIS IS THE DOCUMENT YOU'RE LOOKING, FOR TO COMPLETE OUR REGISTRATION. OUR COMPANY IS HARSHMAN HOME SERVICES, LLC. IT IS IN REGILARDS TO REFERENCE NUMBER WITODOOGIITT

THANKS

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ANDREW HARSHMAN

RECEIVEI 2017 DEC -4 AM 14: 35 SELALIVARIO STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 15, 2017

ANDY HARSHMAN 9550 ST CHRISTINE CT SYLVANIA, OH 43560

SUBJECT: HARSHMAN HOME SERVICES LLC Ref. Number: W17000091177

We have received your document for HARSHMAN HOME SERVICES LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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: 417A00023171



www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

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. HARSHWAN HOWS SERVICES, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")			
(Name of Foreign	Limited Liability Company; must include "Limited Biability Con	npany," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate n	name adopted for the purpose of transacting business in Florida. The alternat	te name must include "Limited Liability Company," "L.L.C," or "L.C.")	
2. STATE OF OF	the foreign limited liability company is organized) 3.		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI number, if applicable)	
4	(Date first transacted humans in Elanda if and respect to service the service of		
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liabilit	(y) /	
5. <u>9550 ST. CI</u> (Street Address of	HRISTING CT 6 Principal Office) OH 43560	(Mailing Address)	
SYLVANIA,	04 43560		
u			
7 Name and street address	ss of Florida registered agent: (P.O. Box <u>NOT</u> accept	ntahla)	
		والمحمد والمحمد المحمد المحم	n
Name:	MIKE GALLAGHER	(¹) 12,447	2. Facio
Office Address:	3734 JUCK AVE		7
	KEY WEST (City)	_,Florida 33040	* .
Registered agent's accept	t (City)	(Zip code)	•
	egistered agent and to accept service of process for t ation, I hereby accept the appointment as registered		
to comply with the provis	ions of all statutes relative to the proper and comple		
and accept the obligation	is of my position as registered agent.		
	Mike Gullof		
8. The name, the or capa <u>Title or Capacity:</u>	acity and address of the person(s) who has/have authors <u>Name and Address:</u> <u>Title o</u>	ority to manage is/are: or Capacity: Name and Address:	
MEMBER	ANDY HARSTMAN		
	ANDY HARSHMAN 9154 WINTERGREENCOT		
			<u> </u>
MEMBER	- CHARLINS HARSHMAN		
	34 - VA-12, 04 43500		

(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 605.0202 (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

AND Y HARSHKIAN

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show HARSHMAN HOME SERVICES LLC, an Ohio For Profit Limited Liability Company, Registration Number 2167021, was organized within the State of Ohio on January 17, 2013, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 30th day of November, A.D. 2017.

for Hasted

Ohio Secretary of State

Validation Number: 201733400354