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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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2117 DEC 14 TR12: 41

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COVER LETTER

TO:

ro:	Registration Section Division of Corporations						
SUBJE	СТ:	DN	Hoines Name	of Limited Liability	Company		
						ansact Business in Florida," Certificate of y company to transact business in Florida.	
Please r	eturn all correspon	ndence c	concerning this matter to	the following:			
			Jeon	Name of Person			
			DN HOW	£ Firm/Company			
			5603 f 10g				
			HOLLY WOOL	y/State and Zip Code	3023		
			Naylon ZH E-mail address: (to be t	ased for future annua	O 1~\ I report not	dification)	
or furt	her information co	ncerning	g this matter, please call:				
	Durion	Name o	My to Contact Person	at (7 S 4 Area Code) <u>L] </u>	rime Telephone Number	
	MAILING ADI Division of Corp Registration Sect P.O. Box 6327 Tallahassee, Fl. 1	orations tion			Division Registrati Clifton B 2661 Exc	of Corporations ion Section duilding secutive Center Circle see, FL 32301	
Enclose	d is a check for the		ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	& □ \$155.00 Fili: Certified Copy		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 6, 2017

JOAN SMITH 5603 FLAGLER ST HOLLYWOOD, FL 33023

SUBJECT: DNHOMES, LLC Ref. Number: W17000096784

2117 DEC 14 PM12: 47

We have received your document for DNHOMES, 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 name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L11000119173.

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.

Jenna D Harris Regulatory Specialist II

2017 BEC 14 AR IN STA

Letter Number: 217A00024656

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: (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.") HOMES IMPROVEMENTS 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 "L.L.C." (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 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. 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: (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

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, **DNHOMES**, **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 June 28, 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 November 24, 2017.

Bollara K. Cegarste

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20171124-0023
You may verify this electronic certificate
online at http://www.nvsos.gov/