M1800001783

(Rec	uestor's Name)	
(Adc	lress)	
(Add	fress)	
	nesa)	
(City	//State/Zip/Phone	#)
PICK-UP		MAIL
(Bus	siness Entity Nam	ne)
(Doo	curnent Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

.

900309297409

02/20/18--01023--019 ++125.00





Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations

5164 CONROY, LLC

SUBJECT: ____

,

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:

٠

Wayne Hagendorf

Name of Person

Hagendorf Law Firm, PLLC

Firm/Company

2000 South Jones Boulevard, Suite 240

Address

Las Vegas, NV 89146

City/State and Zip Code

wayne@hagendorflaw.com

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

For further information concerning this matter, please call:

Wayne Hagendorf		702 at (222-4264	
Name o	of Contact Person	Area Code	Daytime Telephone Number	
MAILING ADDRESS			STREET ADDRESS: Division of Corporations	
Division of Corporation. Registration Section	8		Registration Section	
P.O. Box 6327			Clifton Building	
Tallahassee, FL 32314			2661 Executive Center Circle	
			Tallahassee, FL 32301	
Enclosed is a check for the follow	ving amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	g Fee & 🛛 \$160.00 Filing Fee, Ce of Status & Certified Cop	

, APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605 6902, FLORIDA STATUTEN, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 5164 CONROY, LLC

	ame adopted for the purpose of transacting business in Fl	lorida. The alternate name	must include "Limited Liability	Company," "L.L.C." or "LLC.
Nevada		3.		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI number, if	applicable)
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605 0905, F.S. to determ	o registration.) nine penalty liability)	<u> </u>	
2000 South Jones Bou	levard, Suite 240	6.		
(Street Address of I	rincipal Office)	··	(Mailing Address)	
Las Vegas, NV 89146				
				co
				EB FEB
Name and street addres	s of Florida registered agent: (P.O. Bo;	x <u>NOT</u> acceptable	u)	N N
Name:	Stephen DeCristo			0
ivanic,	1			
Office Address:	11 N Summerlin Avenue			ب - د
	Orlando		Jorida 32801	
	(City)	, , r	(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.

(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:	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
Manager	Jeffrey Hartleroad 2000 S Jones Blvd Ste 240 Las Vegas, NV 89146		
Manager	Craig Haughey 2000 S Jones Blvd Ste 240 Las Vegas, NV 89146		

(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.

(flm_	
	Signature of an authorized person
Jeffrey Hartleroad	

Typed or printed name of signee

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, **5164 CONROY 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 September 29, 2017, and is in good standing in this state.



Electronic Certificate Certificate Number: C20180213-0823 You may verify this electronic certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 13, 2018.

Barbara K. Cegarste

Barbara K. Cegavske Secretary of State