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SECRETARY OF STATE

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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: GENO PROPERTIES 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:
Rodney Atkinson Name of Person
GENO PROPERTIES LLC Firm/Company
2067 Legion Rd.
Sneads, FL 32460 City/State and Zip Code
genoproperties @ Post. com E-mall address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Brian Atkinson at (702) 371-3885 Name of Contact Person 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: S125.00 Filing Fee

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

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
GENO PROPERTIES LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company;" "L.L.C.," or "L	.C.C)
(It name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limit	ed Liability Company," "L.L.C," or "LLC ")
2. // EV o d o (Jurisdicts in under the law of which foreign limited liability company is organized) 3. (FE)	number, if applicable)
4. 12/17/2017 (Date first transacted business in Floral, if prior to registration)	
5. 2067 Legion Rd 6. 2067 Legion Rd 6. 2067 Legion Rd	19:00 Rd
Sneads, FL 32460 Sneads, F	-L 32460
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	- · · · · · · · · · · · · · · · · · · ·
Name: Rodyev Alkinson	100 富工
Office Address: 2067 Legion Rd	調えた
Spead 5 , Florida 32	460 = 20
Registered agent's acceptance:	prode Signature
Having been named as registered agent and to accept service of process for the above stated lin designated in this application, I hereby accept the appointment as registered agent and agree to	
to comply with the provisions of all statutes relative to the proper and complete performance of and accept the obligations of my position as registered agent.	
A Brown - Sellenson	
(Registered area y signature)	
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/a Title or Capacity: Name and Address: Title or Capacity:	
Title or Capacity: Name and Address: Title or Capacity:	re: Name and Address:
Title or Capacity: Name and Address: Title or Capacity:	
Title or Capacity: Name and Address: Title or Capacity:	
Title or Capacity: Name and Address: Title or Capacity:	
Title or Capacity: CED Rolner Alkinson Rolner Roller Rolle	
Title or Capacity: Rolna Alkinson 2.0.6.7 Legien Rol Sneads, PL 32460 (Use attachments if necessary)	Name and Address:
Title or Capacity: CED Rolner Alkinson Rolner Roller Rolle	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 jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a transfer translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am a section 605.0203 (1) (b), Florida Statutes, I am a section 605.0203 (1) (b), Florida Statutes, I am a section 605.0203 (1) (b).	Name and Address:
Title or Capacity: Robert Address: Rob	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 jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a transfer translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am a section 605.0203 (1) (b), Florida Statutes, I am a section 605.0203 (1) (b), Florida Statutes, I am a section 605.0203 (1) (b).	Name and Address:
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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, **GENO 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 March 16, 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 March 1, 2018.

Ballians K. Cegarske

Barbara K. Cegavske Secretary of State

Electronic Certificate

Certificate Number: C20180301-1707 You may verify this electronic certificate online at http://www.nvsos.gov/