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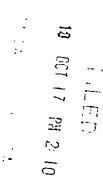
(Requestor's Name)	
(Address)	
(Address)	—
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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#### COVER LETTER

TO: **Registration Section Division of Corporations** 

#### HAMMERHEAD PROPERTY SOLUTIONS, 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 al

Please return all correspondence concerning this matter to the	following:	
Earl O'Brien Pillot		
N	ame of Person	
HAMMERHEAD PRO	PERTY-S	OLUTIONS, ELG-
Fi	irm/Company	
1267 2nd St		
	Address	
Sarasota, FL 34236		
City/S	tate and Zip Code	
brienpillot@res-com		
E-mail address: (to be used	d for future annual re	port notification)
For further information concerning this matter, please call:		
Earl O'Brien Pillot	_at ( <u>941</u> )	356-6988
Name of Contact Person	Area Code	Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.OBox-6327 Tallahassee, FL 32314	Г Б О 2	TREET ADDRESS: Division of Corporations Legistration Section Clifton-Building
Enclosed is a check for the following amount:  2 \$125.00 Filing Fee \$ Certificate of Status	☐ \$155.00 Filing Certified Copy	Fee & S160.00 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:

1267 2nd St (Sireet Address of Principal Sarasota, FL 34236	eign limited liability company is organized)  Date first transacted business in Florida, if proceed sections 605,0904 & 605,0905, F.S. to d. Office)		(FE) numb ) liability)	er, if applicable)	<del>,,.</del>
(Jurisdiction under the law of which for ()  1267 2nd St (Street Address of Principal Sarasota, FL 34236)	Date first transacted business in Florida, if pr See sections 605.0904 & 605.0905, F.S. to d	rior to registration determine penalty	(FE) numb ) liability)	oer, if applicable)	<del></del>
1267 2nd St (Street Address of Principal Sarasota, FL 34236					
1267 2nd St (Street Address of Principal Sarasota, FL 34236					
1267 2nd St (Street Address of Principal Sarasota, FL 34236					
(Street Address of Principal Sarasota, FL 34236	Office)	б.			19
	<del></del>		1267 2nd St (Mailing Add)	ress)	
Name and street address of I			Sarasota, FL 34236	· · · · · · · · · · · · · · · · · · ·	8
Name and street address of I					<u> </u>
Name and street address of I					
	Plorida registered agent: (P.O.	Box NOT	icceptable)		말
N Re	gistered Agents Inc.				· 12
				·	5
Office Address: 303	30 N. Rocky Point Dr. S	STE 150A	<u></u>		
Ta	mpa		, Florida 33607		
<u></u>	(City)		(Zip cod	c)	
G*€					
<u> </u>	(Paristanda	ment's signatum)	<u> </u>		
<u> </u>	(Registered a	gent's signature)	<del></del>		
The name, title or capacity:	(Registered a) and address of the person(s) wh Name and Address:	ho has/have	authority to manage is/are;	Name an	d Address:
Title or Capacity:	and address of the person(s) when Name and Address:	ho has/have		Name an	d Address:
	nnd address of the person(s) when Name and Address:  Earl O'Brien Pillot  1267 2nd St	ho has/have		Name an	d Address:
Title or Capacity:	and address of the person(s) when Name and Address:  Earl O'Brien Pillot	ho has/have		Name an	d Address:
Title or Capacity:	nnd address of the person(s) when Name and Address:  Earl O'Brien Pillot  1267 2nd St	ho has/have		Name an	d Address:
Title or Capacity:	nnd address of the person(s) when Name and Address:  Earl O'Brien Pillot  1267 2nd St	ho has/have		Name an	d Address:
Title or Capacity:	nnd address of the person(s) when Name and Address:  Earl O'Brien Pillot  1267 2nd St	ho has/have		Name an	d Address:

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, **HAMMERHEAD PROPERTY SOLUTIONS**, **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 26, 2018, 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 October 8, 2018.

Ballara K. Cegevske

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20181008-0540