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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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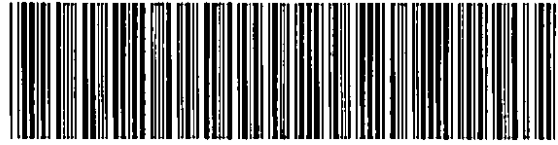
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: CLEARWATER FLORIDA HOTEL MANAGEMENT, 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:

Michael LaSala

\_\_\_\_\_  
Name of Person

IncSmart.biz, Inc

\_\_\_\_\_  
Firm/Company

3609 Hammerkop Dr.

\_\_\_\_\_  
Address

North Las Vegas, NV 89084

\_\_\_\_\_  
City/State and Zip Code

michael@incsmart.biz

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

For further information concerning this matter, please call:

Michael LaSala

702  
at ( )

334-0391

\_\_\_\_\_  
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:

\$125.00 Filing Fee

\$130.00 Filing Fee &  
Certificate of Status

\$155.00 Filing Fee &  
Certified Copy

\$160.00 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:*

1. CLEARWATER FLORIDA HOTEL MANAGEMENT, LLC  
 (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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 "LLC.")

2. MI (Jurisdiction under the law of which foreign limited liability company is organized)      3. \_\_\_\_\_ (FEI number, if applicable)

4. \_\_\_\_\_  
 (Date first transacted business in Florida, if prior to registration.)  
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 55 E. LONG LAKE ROAD (Street Address of Principal Office)  
SUITE #204  
TROY, MI 48085

6. 55 E. LONG LAKE ROAD (Mailing Address)  
SUITE #204  
TROY, MI 48085

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Registered Agents Inc.

Office Address: 3030 N. Rocky Point Dr. STE 150A  
Tampa, Florida 33607  
 (City) (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.*

*Bill H...*  
 (Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>
<u>MGRM</u>	<u>David Davutoglu</u> <small>55 E. Long Lake Road Suite #204                      Troy, MI 48085-4738</small>	_____
_____	_____	_____
_____	_____	_____

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(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.

*Michael LaSala*  
 Signature of an authorized person

Michael LaSala  
 Typed or printed name of signee

UNITED STATES OF AMERICA



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

CLEARWATER FLORIDA HOTEL MANAGEMENT, LLC

was validly authorized on November 8, 2018, as a Michigan DOMESTIC LIMITED LIABILITY COMPANY, and said limited liability company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

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CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU  
LANSING, MICHIGAN

This certificate is issued pursuant to the provisions of 1993 PA 23 to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 9th day of November, 2018.

*Julia Dale*

Julia Dale, Director  
Corporations, Securities & Commercial Licensing Bureau

Sent by electronic transmission

Certificate Number: 18119103660