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SCRETARY OF STATE
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	SUNBURST SHUTTERS DELRAY LLC				
00000000		mited Liability Company			
		ny for Authorization to Transact Business in Florida," Certificate of ced foreign limited liability company to transact business in Florida.			
Please return	n all correspondence concerning this matter to the fo	llowing:			
	KURT TAYLOR				
	Nan	ne of Person			
	SUNBURST SHUTTERS DELRAY LLC				
	Firm/Company				
	10091 PARK RUN DRIVE, SUITE 190				
	Address				
	LAS VEGAS, NV 89145				
	City/Stat	e and Zip Code			
	ktaylor@sunburstshutters.com				
	E-mail address: (to be used f	or future annual report notification)			
For further in	nformation concerning this matter, please call:				
Ku	rt Taylor	702 870-4488			
	Name of Contact Person	Area Code Daytime Telephone Number			
Div Reg P.O	AILING ADDRESS: rision of Corporations gistration Section b. Box 6327 lahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	closed is a check for the following amount: ase make check payable to: FLORIDA DEPARTM	ENT OF STATE			
	\$125.00 Filing Fee S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certificate			

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:

		A	ny," "L.L.C," or "LLC.
VADA		83-3128472 3.	
irisdiction under the law of w	which foreign limited liability company is organized)	3. (FEI number, if applicable)	
			<u>:</u>
	(Date first transpared burns as Clarids of		- 1
	(Date first transacted business in Florida, if prior to reg (See sections 605.0964 & 605.0905, F.S. to determine	senalty liability)	- 60 -
50 WALLACE DR.	. UNIT A	10091 PARK RUN DRIVE SUITE	1902 -
(Street Address of	Principal Office)	(Mailing Address)	下,
ELRAY BEACH, FL	L 33444	LAS VEGAS, NV 89145	2: 1: 08:16:
nne and <u>street addres</u>	ss of Florida registered agent: (P.O. Box N	OT acceptable)	
me and <u>street addres</u> Name:	ss of Florida registered agent: (P.O. Box Note: 1)	<u>OT</u> acceptable)	
		OT acceptable)	
Name:	C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION	OT acceptable) 33324 . Florida	
Name:	C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD	33324	

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Title or Capacity: Name and Address: Name and Address: Name: MATTHEW THELANDER DIX JARMAN Manager Manager 10091 Park Run Drive 700 Church Road Address: Member Address: Member Suite 190 Elgin, IL 60123 Authorized Authorized Las Vegas, NV 89145 Person Person Other____ __Other_ Other_ Name: ___ TRACY METROVICH Manager Manager 10091 Park Run Drive 30435 Confinercon rive Member Member Suite 190 Suite 104 Authorized Authorized Las Vegas, NV 89145 San Antonio, FL 33576 Person Person Other Other __Other___ Other Name: KURT TAYLOR ■ Manager Manager Name: _____ 10091 Park Run Drive Member Address: ☐ Member Address: Suite 190 Authorized Authorized Las Vegas, NV 89145 Person Person Other_ Other Other____ Other____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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

Typed or printed name of signee

Kuri Taylor, Manager

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, **SUNBURST SHUTTERS DELRAY 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 January 11, 2019, and is in good standing in this state.

SEAL OF THE O

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 5, 2019.

Boulans K. Cegewske

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20190205-1208