

M190000010743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

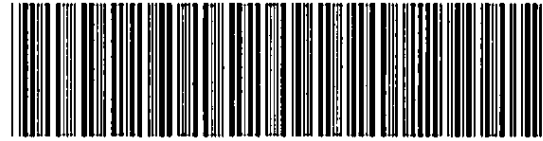
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600336039076

10/29/19--01011--004 **160.00

2019 OCT 29 PM 6:04

T GLASS

NOV 06 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lockett In Global Solutions, LLC doing business as Lockett-N-Homes

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:

Frieda L. Chambers

Name of Person

Lockett In Global Solutions, LLC

Firm/Company

1133 Bal Harbor Blvd, Ste 1139, PMB 184

Address

Punta Gorda, FL 33950

City/State and Zip Code

Frieda@Lockettnhomes.com

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

For further information concerning this matter, please call:

Frieda L. Chambers

240

832-4804.

at ()

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**



\$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

2019 OCT 29 PM 6:04

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. Lockett In Global Solutions, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

LNH Realty

(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. Los Angeles County
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 262844967
(FEI number, if applicable)

4. September 19, 2019
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)

5. 1133 Bal Harbor Blvd, Ste 1139, PMB 184
(Street Address of Principal Office)

6. 1133 Bal Harbor Blvd, Ste 1139, PMB 184
(Mailing Address)

Punta Gorda, FL 33950
Punta Gorda, FL 33950

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

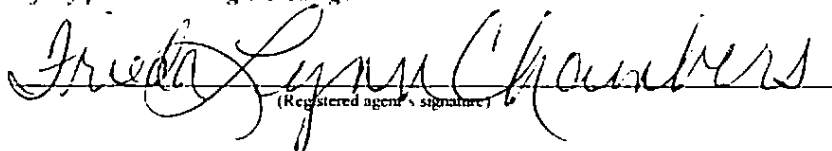
Name: Frieda Lynn Chambers

Office Address: 1133 Bal Harbor Blvd, Ste 1139, PMB 184

Punta Gorda 33950
(City) , Florida (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)

2019 OCT 29 PM 6:04

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: **Name and Address:**

☒ Manager Name: Frieda L. Chambers

☐ Member Address: 7142 Alfred Blvd

☐ Authorized Punta Gorda, FL 33982

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☒ Manager Name: Adonis D. Lockett

☐ Member Address: 900 Blossenwood Ct

☐ Authorized Arlington, TX 76017

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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

Frieda L. Chambers

Typed or printed name of signer

State of California
Secretary of State
CERTIFICATE OF STATUS

ENTITY NAME: LOCKETT IN GLOBAL SOLUTIONS LLC

FILE NUMBER: 200816210175
FORMATION DATE: 06/09/2008
TYPE: DOMESTIC LIMITED LIABILITY COMPANY
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.

2019 OCT 29 PM 6:04



IN WITNESS WHEREOF, I execute this
certificate and affix the Great Seal
of the State of California this day of
October 16, 2019.

A handwritten signature in black ink, appearing to read 'Alex Padilla', is written over a horizontal line.

ALEX PADILLA
Secretary of State

FSB