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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				
Special Instructions to Filing Officer.				

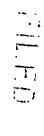
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SECRETARY OF STATE
LLAHASSEF, FLORIDA



COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	CASHIO LAND, LLC ECT:
	Name of Limited Liability Company
The en Exister	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of nee, 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:
	FRANCISCO A. CORRALES, ESQ.
	Name of Person
	THE CORRALES LAW FIRM, PLLC
	Firm/Company Firm/Company 3275 WEST HILLSBORO BOULEVARD, SUITE 104
	3275 WEST HILLSBORO BOULEVARD, SUITE 104
	Address
	DEERFIELD BEACH, FL 33442 City/State and Zip Code City/State and Zip Code
	City/State and Zip Code Pr 9
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	FRANCISCO CORRALES 954 846-1943
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE. \$125.00 Filing Fee \$\Begin{array}{c} \S130.00 \text{ Filing Fee & } \Begin{array}{c} \S155.00 \text{ Filing Fee & } \Begin{array}{c} \S160.00 \text{ Filing Fee, Certificate of Status} \end{array}\$ 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 IN SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(.vaile of roleig	n Limited Liability Company; must include "Limite	d Liability Company," "L.L (C.," of "LLCV")	-	
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	rida. The abernate name must mel	ude "Limited Liability (Tempany."	"L L C," or "LLC '	
CALIFORNIA	which foreign humed handity company is organized)	47-2093344 3.	(Ell majorical applicable)		
4	(Date first transacted business in Florida, if prior to	registration.	C-2	 	
5. 6230 WILSHIRE BO	(See sections 605 19904 & 805 (89)5, F.S. to determ	no penalty liability)	REBOULEYARD 2: (Vaihing Addless 1: 9)		
SUITE 313		SUITE 313	D		
LOS ANGELES, CA 90048		LOS ANGELES, CA 90048			
7. Name and street addre	ess of Florida registered agent: (P.O. Box	<u>NOT</u> acceptable)			
Name:	THE CORRALES LAW FIRM, PLLC				
Office Address:	3275 WEST HILLSBORO BOULEVA	RD, STE 104			
	DEERFIELD BEACH	, Florida	33442		

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)

Bu: Inoncisco cornules

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]:

Fitle or Capacity:	Name and Address:	Title or Capacit	<u>y:</u>	Name and Address:
Manager	Name: REDLAND ENTERPRISES LLC		Name:	
Member	Address: 6230 WILSHIRE BLVD.	Member	Address: _	
Authorized	SUITE 313	☐ Authorized		
Person	LOS ANGELES, CA 90048	Person		
Other	Other	[]Other		20 10 10 10 10 10 10 10 10 10 10 10 10 10
∏Manager	Name: FRANCISCO CORRALES	☐ Manager	Name:	C-2 LARY
Member	Address: 3275 W. HILLSBORO BLVD	☐ Member	Address: _	PH 2:
Authorized	SUITE 104	Authorized		ORIO
Person	DEERFIELD BEACH, FL 33442	Person		
Other	Other	Other		Other
]Manager	Name:	☐ Manager	Name:	
]Member	Address:	Member	Address: _	
]Authorized		Authorized		
Person		Person		<u>_</u>
Other	Other	Other		(+1her

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.

FRANCISCO CORRALES, AUTHORIZED PERSON

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: CASHIO LAND, LLC

FILE NUMBER: FORMATION DATE:

201421610029

TYPE:

08/01/2014

JURISDICTION:

DOMESTIC LIMITED LIABILITY COMPANY

N: 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.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 12, 2019.

ALEX PADILLA Secretary of State