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(Address)				
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(City/State/Zip/Phone #)				
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(Business Entity Name)				
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FEB 11 2023] T. LEMEUX

HT Enterprises, QQC

698 Pine Crest Ct. Leonard, Mt 48367 586-295-4058 Mrsrhenry@aol.com

December 9, 2019

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Enclosed is our application to do business in the state of Florida.

Before completing the paperwork, I did search our LLC name and found that it was formerly used in the state of Florida, but is now inactive. Based on this information, I am going forward in using our LLC name as it was created here in Michigan. If this is not acceptable, could we use the name as follows: HF Enterprises FL, LLC? Does something else need to be done?

If appropriate, you are welcome to call me at the above number or you can email me at the above address. Hopefully, everything is in good order.

Sincerely,

Ruth Henry

Enclosures

COVER LETTER

TO:

TO:	Registration Section Division of Corporations					
CHR II	ccr. HF Enterp	rises, LLC				
SUDUL		Name	of Limited Liability	Company		
	closed "Application by Forei nce, and check are submitted					
Please	return all correspondence col	ncerning this matter to t	the following:			
	<u></u>	Rut	h Henry Name of Person			
			Name of Person			
		HF Ente	Firm/Company	<u></u>		
	6	.98 Pine C	rest Ct.			
			Address			
		Leonard, City	M: 4836	57		
	<u> </u>	CSChency E-mail address: (to be	ieal. Consed for future annua	l report notificati	on)	
For fur	ther information concerning					
	Ruth Henry Name of	1	at (_ 586	295-	4058	
		Contact Person	Area Code	-		
	MAILING ADDRESS: Division of Corporations			STREET ADI Division of Co		
	Registration Section P.O. Box 6327			Registration Se Clifton Buildin		
	Tallahassee, FL 32314			2661 Executive Tallahassee, FI	Center Circle	
	Enclosed is a check for the Please make check payable		RTMENT OF STA	.TE		
	\$125.00 Filing Fee	\$130.00 Filing Fe Certificate of	e & 🔲 \$155.00	Filing Fee & Ted Copy	\$160.00 Filing Fee, C of Status & Certified G	



January 14, 2020

RUTH HENRY 698 PINE CREST CT LEONARD, MI 48367

SUBJECT: HF ENTERPRISES, LLC

Ref. Number: W20000002995

We have received your document for HF ENTERPRISES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 920A00001021

RECENIED

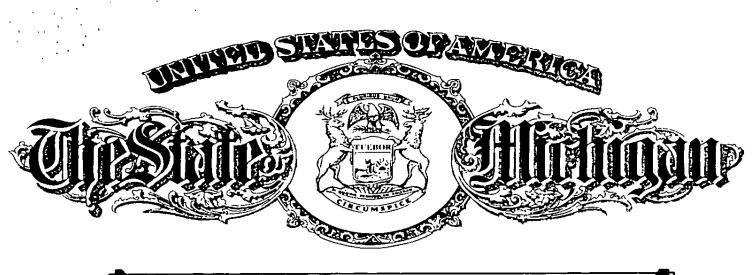
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	'CTION 605,0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY. BUSINESS IN THE STATE OF FLORIDA:
1. HE Control (Name of Foreign	n Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
HF Futera	Ases of MT 110
(II 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 "L.L.C.")
2. Hichiga (Jurisdiction under the law)	thich foreign limited hability company is organized) 3. 84-3673170 (HEI manifer, if applicable)
4	
··· - - <u></u> -	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
100 De	
5. <u>666 PM2</u>	Crest Ct. 6. Stime
(Auter Audless III)	(Mailing Address)
Leonard,	M: 48367
	· · · · · · · · · · · · · · · · · · ·
7 Marou and atmost added	
. Name and street adores	s of Florida registered agent: (P.O. Box NOT acceptable)
Name:	NICHOLAS W. MULICK, PA 91645 Overseas Highway Tavernier (City) Florida 33070
Office Address:	91645 Overseas Highway
	Tavernier 33070 = 1
	Tavernier Florida 33070 77
	The second secon
esignated in this applicate comply with the provision	tance: gistered agent and to accept service of process for the above stated limited liability, company at the place ion, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree ons of all statutes relative to the proper and complete performance of my duties? and I am familiar with of my position as registered agent.
	/Nicholas W. Mulick, Esq.
	(Registered agent's simpling)

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]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: Manager Manager Manager Name: Member ☐ Member Address: ___ __ __ __ __ Leonard, M. 48367 Authorized Authorized Person Person Other____ Other_ Other__ Other Manager Name: _______ Manager Member Member Address: Mauthorized Authorized Person Person Other_____ Other Other Other____ Manager Manager | Name: Name: Member Address: ______ Address: ______ ☐Member Authorized ■Authorized 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

Ruth Henry

Typed on printed name of signee



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That HF ENTERPRISES, LLC

was validly authorized on November 13, 2019, 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.

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.



Sent by electronic transmission

Certificate Number: 19127141460

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 4th day of December, 2019.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau