11200000057/6

(Re	equestor's Name)				
(Ac	ddress)				
(Ac	ddress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(В	usiness Entity Nan	ne)			
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



100346089911

06/23/20--01018--012 **130.00



COOR & S NAME

COVER LETTER

TO:

	S&S Houses LLC	
Ji	ECT:Nam	e of Limited Liability Company
		, , ,
		Company for Authorization to Transact Business in Florida," Certificat referenced foreign limited liability company to transact business in Florida.
	return all correspondence concerning this matter t	
	Jason Seidel	U
	- 11-100-101 S-AMA	Name of Person
	S&S Houses LLC	
		Firm/Company
	2211 Whitlock Pl	
		Address
	Dover, FL 33527	
		City/State and Zip Code
	sshousesllc@gmail.com	
	E-mail address: (to be	e used for future annual report notification)
ùr	ther information concerning this matter, please ca	ii:
	Jason Seidel	610 334-1211 at (
	Name of Contact Person	at () Area Code Daytime Telephone Number
Mailing Address:		Street Address:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount:	
	Discount of the second of the	CARTER ARTER ARTER AND COMPANY AND COMPANY
	Please make check payable to: FLORIDA DEP □ \$125.00 Filing Fee □ \$130.00 Filing Fe	

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:

	name adopted for the purpose of transacting business in Flori	da. The atternate name must include "Limited Liabin	ty company, Line, or the	C. J	
Pennsylvania 2.		83-1299191 3.			
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)			
4	(Det Cetterment Liver to Head of Court		_		
	(Date first transacted business in Florids, if prior to reg (See sections 605.0904 & 605.0905, F.S. to determine	penalty liability)			
2211 Whitlock Pl		2211 Whitlock Pl 6.			
Street Address of Principal Office)		6. (Mailing Address)			
Dover, Fl. 33527		Dover, FL 33527			
7. Name and street address	ss of Florida registered agent: (P.O. Box]	NOT acceptable)			
	Jason Seidel		15 153 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Name:	3.3301. Seider		AT TO	•.	
	2211 Whitlock Pl			•	
Office Address:					
	Dover	33527 , Florida	·•		
		, 1 101104			

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: Title or Capacity: Name and Address: Jason Seidel Name: Dylan Shollenberger □Manager □Manager 2211 Whilock PI 2211 Whitlock Pl Address: **■**Member ■ Member Address: Dover, FL 33527 Dover, FL 33527 □ Authorized □ Authorized Person Person Other ☐Other_____ □Other Other_____ □Manager □Manager Name: Name: ☐ Member Address: □ Member Address: ☐ Authorized □ Authorized Person Person Other____ Other____ Other____ Other □Manager Name: □Manager Name: ______ ☐ Member Address: Address: ☐ Member ☐ Authorized □ Authorized Person Person 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.

Typed or printed name of signee

Jason Seidel

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

06/18/2020

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

S&S Houses LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

THE COUNTY OF TH

IN TESTEMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC200617223035-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify