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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HONU CAPITAL HOLDINGS, LLC

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:

Kyle Roddy	
	Name of Person
HONU CAPITAL	HOLDINGS, LLC
	Firm/Company
17363 State Hig	hway 31 E
	Address
Tyler, TX 75705	
	City/State and Zip Code
kwgmtrod1994@	me.com
•	be used for future annual report notification)
information concerning this matter, please	call:
Cyle Roddy	_{at} 903 541-1998
Name of Contact Person	Area Code Daytime Telephone Number
AILING ADDRESS:	STREET ADDRESS: Division of Corporations
ivision of Corporations	Registration Section
egistration Section	
egistration Section O. Box 6327 allahassee, FL 32314	Clifton Building 2661 Executive Center Circle

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

IN COMPLIANCE WITH SECTION 605 (902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED IT (BILLIT) COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA _{I.} HONU CAPITAL HOLDINGS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L. L. C., " or "LLC") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The a ternate mane must include "Landed Liability Company." "L.L.C. or .E.L.C.... Nevada (Jurisdiction under the law of which foreign hinsted habitary company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 603 0904 & 603 0903, F.S. to determine penalty limbility) 17363 State Highway 31 E 6. _____ State Highway 31 E (Street Address of Principal Office) Tyler, TX 75705 Tyler, TX 75705 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) NCH REGISTERED AGENT Name: 390 North Orange Ave., Ste.2300 Office Address: Orlando Having been named as registered agent and to accept service of process for the above stated limited liability company at the place Having been named as registered agent and agree to act in this capacity. I further agree designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree designated in this provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with 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

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: Name and Address: Title or Capacity: Name: Geri Roddy Name: Kyle Roddy Manager ✓ Manager Address: 17363 State Highway 31 E Address: _ 17363 State Highway 31 E Member Member Tyler, TX 75705 Tyler, TX 75705 Authorized Authorized Person Person Other Other____ Other_ Other Manager Manager Name: ______ Member | Address: _____ Address: ______ Member Authorized Authorized Person Person Other_____ Other_ Other Manager Name: Manager Name: _____ Member | Member Address: _ _ _ _ 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.

Typed or printed name of signee

Kvle Roddv

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected 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, corporations sole, 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, \sim evidence, **HONU CAPITAL HOLDINGS, LLC**, as a DOMESTIC LIMITED-LIABILITY \geq COMPANY (86) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 04/09/2018, and is in good standing in this state.

Certificate Number: B202012081264509

You may verify this certificate online at http://www.nysos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 12 08/2020.

Barbara K. Cegarske
BARBARA K. CEGAVSKE
Secretary of State