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(((H21000309534 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

Foreign Limited Liability Company Good Neighbors Home Rentals LLC

Certificate of Status	0
Certified Copy	0
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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

New York (Jurisdiction under the law of which foreign limited liability company is organized)		orida. The alternate name must include "Emitted Liability Company," "L.E.C." or "LEC 3. 45-1723506 (FEI number, if applicable)		
	(Date first transacted business in Florida, if pro (See sections 605,0904 & 605,0905, F.S. to det			
7901 4th St N		6. 3 Highview road (Mailing Address)		
STE 300	rincipal Office)	(
St. Petersbu	urg FL 33702	Buffalo New York 14219		
ame and street addres	s of Florida registered agent: (P.O. I	Box NOT acceptable)		
Name:	Northwest Registered	Agent LLC TE 300 33702		
Office Address:	7901 4th St N STE 300			
CARCE Address.	St. Petersburg	, Florida 33702		

(Registered agent's signature)

Tawan Slaughter 3 Highview Road ffalo NY 14215 Other	☐ Manager ☐ Member ☐ Authorized Person	Address:
falo NY 14215	Authorized	
	.—	
Other	Person	
Other _		
	Other	Other
ress:	☐ Manager	Name: Address:
	☐ Authorized	
	Person	
Other	Other	Other
ne:	☐ Manager	Name:
dress:	Member	Address:
	Authorized	
	Person	
Other	Other	Other
	Other Other a attachment to report more than six (6). be added to the index when filing your	ress: Member Authorized Person Other Manager Member Authorized Person Authorized Person Authorized Person

Lyped or printed name of signee

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

L ROSSANA ROSADO. Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: GOOD NEIGHBORS HOME RENTALS LLC

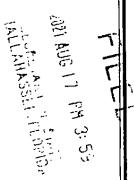
DOS ID Number: 5781824

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING
Date of Initial Filing with DOS: 07:07:2020

Statement Status: CURRENT

Statement Due Date: 07/31/2022



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



WITNESS my hand and official seal of the Department of State, at the City of Albany, on August $\theta 9,\,2021$ at $\theta 9;25$ A.M.

ROSSANA ROSADO, Secretary of State

Brandon Co Hughan

By Brendan C. Hughes Executive Deputy Secretary of State

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