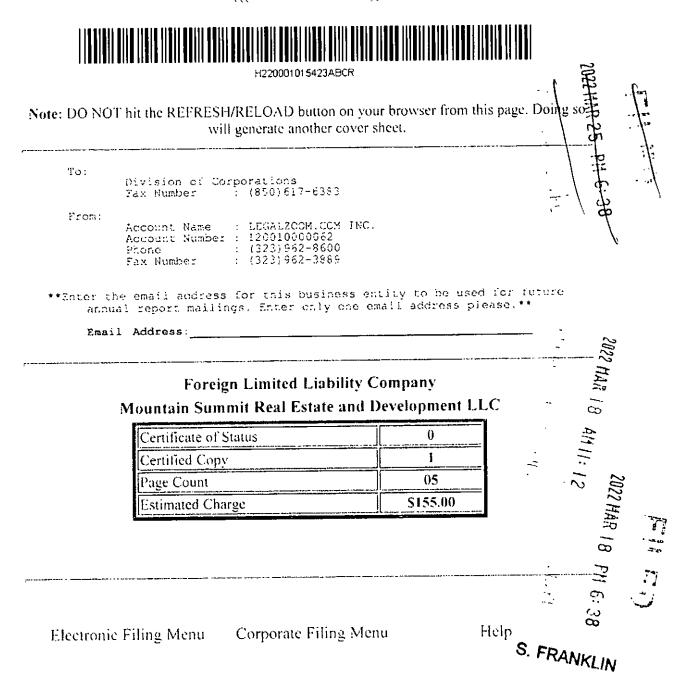
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220001015423)))



MAR 2 1 2022

TO:

Registration Section

COVER LETTER

Div	rision of Corporations							
SUBJECT:	Mountain Summit Real Estate and Development LLC Name of Limited Liability Company							
SOBJECT.								
The enclosed Existence, an	d "Application by Foreign Limited Liability Co nd check are submitted to register the above re	mpany for Authorization to Tra erenced foreign limited liability	ansact Business in Florida," C y company to transact busine	Certificate of ess in Florida.				
Please return	n all correspondence concerning this matter to	he following:						
	Cheyenne Moseley							
		Name of Person						
	Legalzoom.com, Inc.							
Firm/Company								
	101 N Brand Blvd 11th Fl							
	Address							
	Glendale, CA 91203							
	City/State and Zip Code							
	mountainsummitdev@gmail.com		<u>-</u> \					
	E-mail address: (to be	used for future annual report no	Hification)	202				
For further	information concerning this matter, please call		. '	\ <u>2</u> #A				
Ct	heyenne Moseley	800 773-08	888	6-382022 MAR 18				
	Name of Contact Person	Area Code Da	ytime Telephone Number	3				
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registra Clifton I 2661 Ex	T ADDRESS: a of Corporations ntion Section Building securive Center Circle ssee, FL 32301	₩ 6:3 8				
En Ple	nclosed is a check for the following amount: ease make check payable to: FLORIDA DEP.	ARTMENT OF STATE	_					
_	S125.00 Filing Fee S130.00 Filing F	ee & 📕 \$155.00 Filing Fo	ee & S160,00 Filing I of Status & Cert					

From: Sylvia Paull

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

COMPANY TO TRANSACT BU	TION 805.0802, FLORIDA STATUTES, THE FOLLO SINESS AN THE STATE OF FLORIDA:		2 HA	
	Estate and Development LLC			
(Name of Foreign	Linuted Liability Company; must include "Limited Lia	bility Company," "L.L.C.," or "LLC.")	: 8	
			· ₽ .	
(If name intavallable, enter alternate na	ame adopted for the purpose of transacting business in Florida. I	he alternate name must include "Limited Liability Con	mpany," "L.L.C." or "LLC.")	
North Carolina		88-1015037	: 3 8	
(Jurisdiction under the law of wh	nch foreign funited liability company is organized)	(FL) number, if app		
4.		<u> </u>		
	(Date first transacted business in Florida, if prior to regist (See sections 605-0904 & 605-0905, U.S. to determine per	ration) naby liability)		
5. (Street Address of F	'rincipal Office)	(Yauling Address)		
7727 N OF 1 167		7226 N Highway 107		
7226 N Highway 107				
Glenville, North Carol	ina 28736	Glenville, North Carolina 28736		
			721	
7. Name and street address	ss of Florida registered agent: (P.O. Box <u>N</u>	<u>)Tacceptable)</u>		
			11. 15	
Name:	UNITED STATES CORPORATION AG	ENTS, INC.		
	7000 D D D D D D D D D D D D D D D D D D		· · · · · /	
Office Address:	5575 S. Semoran Blvd., Suite 36		()	
	O.L. de	32822	- d/	
	Orlando	, Florida		
	(City)	(Zip code)	•	
Registered agent's accep	stance:		re and the	
Having been named as re	rgistered agent and to accept service of pro- tion. I hereby accept the appointment as re	ess for the above stated limited habb oixtered agent and agree to act in thi	ay company at the place s capacity. I further agree	
to comply with the provis	ions of all statutes relative to the proper an is of my position as registered agent.	d complete performance of my duties	, and I am familiar with	
una ut ceja ine omiganon	C	HEYENNE MOSELEY, ASSISTANT	SECRETARY,	
	Ĺ	INITED STATES CORPORATION AC	ENTS, INC.	
	(Registered agent's signa	(tre)	-	

Page: 5 of 6

Title or Capacity:	Name and Address:	Title or Capacity	<u>Y:</u>	Name and Address
Manager	Name: Alex Bailey	Manager Manager	Name:	
Member	Address: 7226 N Highway 107	Member	Address:	
Authorized	Gienville, North Carolina 28736	☐ Authorized		
Person		Person		हीं क
Other	Other	Other		Other 3 3
Manager	Name:	Manager	Name:	
Member	Address:	Member	Address:	
Authorized		Authorized		
Person		Person		
Other	Other	Other		Other
☐Manager	Name:	Manager	Name:	2027
Member	Address;	☐ Member	Address:	
Authorized		Authorized		- 72
Person	12-17	Person		7
Other	Other	[[Other		Other
9. Attached is a co- jurisdiction under to of the translator mu 10. This document	Use an attachment to report more than six (6), s may be added to the index when filing your refificate of existence, no more than 90 days old the law of which it is organized. (If the certificate be submitted) is executed in accordance with section 605.02 ament to the Department of State constitutes a	Florida Department of Sta d, duly authenticated by the ate is in a foreign language 203 (1) (b), Florida Statute third degree felony as pro	ate Annual Repose official bavinge, a translation	rting purposes only. Non- ort form. ng custody of records in the n of the certificate under oath that any false information

Typed or printed name of nignee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina do hereby certify that

MOUNTAIN SUMMIT REAL ESTATE AND DEVELOPMENT LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 3rd day of March, 2022

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of magger, or articles of conversion for said limited liability company.





Scan to verify online.

Elaine J. Marshall

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 18th day of March, 2022.

Secretary of State

Certification# 112593186-1 Reference# 18324254- Page; 1 of 1 Verify this certificate online at https://www.sosne.gov/verification