M22000/5809

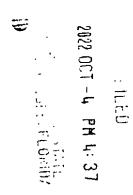
(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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COVER LETTER

	Division of Corporations Florida Golden R. Heart Ranch, LLC						
SUBJEC	C1: 2 11:122. C2.						
Name of Limited Liability Company							
		Company for Authorization to Transact Business in Florida," Certificate o referenced foreign limited liability company to transact business in Florida					
Please re	eturn all correspondence concerning this matter to	o the following:					
	Raquel Ventura						
		Name of Person					
Anderson, Dorn & Rader, Ltd.							
Firm/Company 500 Damonte Ranch Pkwy, Suite 860							
	Reno, NV 89521						
	C	ity/State and Zip Code					
	waynerankin@gmail.com						
	E-mail address: (to be	used for future annual report notification)					
For furth	ner information concerning this matter, please cal	II:					
	Raquel Ventura	775 823-9455					
	Name of Contact Person	Area Code Daytime Telephone Number					
	Mailing Address:	Street Address:					
	Registration Section	Registration Section					
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee					
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810					
	Turminosee, T. E. S. E. T.	Tallahassee, FL 32303					
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEP ■ \$125.00 Filing Fee □ \$130.00 Filing Fee Certificate of	e & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate					

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

IN COMPILANCE 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;

1. Florida Golden R. Hear	rt Ranch, LLC Limited Liability Company; must include "Limited	112.4 (P., Z)			
Rankin Florida Golden R.		a Liability Compan	y, L.L.C., or LLC.)		
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in FI	orida. The alternate n	ame must include "Limited Lia	ibility Company," "L.L.C," o	σ "1.1.C ")
Nevada 2. (Introduction under the law of w	88- 367				
(Jurisdiction under the law of w		3. (FEI number, if applicable)			
08/10/2022 4.					
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	registration) ne penalty liability)			
525 Coney Island Dr. 5 5. (Street Address of Principal Office)	Sparks, NV 89431	6. Same a	s Principal Office Aduling Address)	dress	
·					_
				2022	
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptal	ole)	JC I	, •
Name:	Wayne C. Rankin				<u> </u>
Office Address:	2252 CR 202	 		E LORIDA	- ວ
	Oxford		34484 Florida		J
	(City)		(Zip code)		

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree 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 registerfd agent.

(Registered agent's signature)

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:				
■Manager	Name: Wayne C. Rankin	□Manager	Name:					
□Member	Address: 525 Coney Island Dr.	□Member	Address:					
□Authorized	Sparks, NV 89431	□Authorized						
Person		Person						
□Other	Other	□Other	 	Other				
□N4	Name	□ Monous	Name					
□Manager	Name:	□Manager						
□Member	Address:	□Member	Address:					
□Authorized		□Authorized						
Person		Person						
□Other	Other	Other		□Other				
□Manager	Name:	□Manager	Name:					
□Member	Address:	□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. Non-indexed 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								
Wayne C. Rankin								
Typed or printed name of signee								

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, evidence, Florida Golden R Heart Ranch, LLC, as a DOMESTIC LIMITED-LIABILITY COMPANY (86) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 08/10/2022, and is in good standing in this state.

Certificate Number: B202209132998351

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

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 09/13/2022.

Barbara K. Cegavske
BARBARA K. CEGAVSKE
Secretary of State