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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number: I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

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

Email Address: EFILE1234@INCFILE.COM

Foreign Limited Liability Company

RHINO IRRIGATION AND LANDSCAPE SERVICES LLC

Certificate of Status	1
Certified Copy	0
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COVER LETTER

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TO:

Registration Section Division of Corporations

SUBJECT: RHINO IRRIGATION AND LANDSCAPE SERVICES 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:

	Name of Person
	Firm/Company
	Threcompany
17350 STATE HWY	249 #220
	Address
HOUSTON, TX 7706	34
	City/State and Zip Code
	- 0011
EFILE 1234@INCFILE	E.COM be used for future annual report notification)
E-man address: (to	be used for future animal report notification)
orther information concerning this matter, please of	call:
LOVETTE DOBSON	_{at (} 1 ₎ <u>888-462-3453</u>
Name of Contact Person	Area Code Daytime Telephone Number
Mailing Address:	Street Address:
	Registration Section
Registration Section Division of Corporations	Registration Section Division of Corporations
Registration Section	
Registration Section Division of Corporations	Division of Corporations
Registration Section Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:	Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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 RUSINESS IN THE STATE OF FLORIDA:

		Limited Ltability Company," "L.L.C.," or "LLC.")			_
_	naire adopted for the purpose of transacting busine	iss in Florida. The alternate name must include "Limited Liability		LL C." or "	LLC,")
Texas Unisdiction under the law of w	hich foreign limited liability company is organized	3. 88-0614747 (FEI number, if:	applicable)		-
·	(N. Martin and Barren and Barren				
	(Date first transacted business in Florida, if p (See sections 605 0904 & 605 0905, F.S. to)	determine penalty hability)			
1150 Nw 72r	nd Ave Tower 1	6. 1150 Nw 72nd Av	e Tow	<u>er 1</u>	-
Ste 455 #12	164	Ste 455 #12164			-
Miami, FL 33	126	Miami, FL 33126	<u> </u>		-
. Name and <u>street addre</u> ;	s of Florida registered agent: (P.O.	. Box NOT acceptable)	.,	21	
Name:	REPUBLIC REGIS	TERED AGENT LLC		2023 JUL 31 AM 11:3	- -
Office Address:	1150 Nw 72nd Ave	Tower I Ste 455	5/	3 A	rate;
	Miami	, Florida 33126	- <u>-</u>	11: 35	-ects
esignated in this applica comply with the provis	gistered agent and to accept servic tion, I hereby accept the appointm	e of process for the above stated limited liab ent as registered agent and agree to act in th coper and complete performance of my dutie t.	is capacity	: I furti	her ag

S	For	initial indexing po	aposes, list name	s, title or cipacity	and addresses of	of the primary	members/managers or	persons	authorized to
1113	สหกุรจ	: Jupito six (6) total	tj.						

Fitle or Canacity:	Name and Address:	Title or Capacity:	Same and Address:
Manager	Name Jose Cadena	¹³ Manager	Name Mario Deleon
S Member	Address 2821 Lotus Park	≾ Member	Address 117 Bobby Lynn Driv
Nothoused	Schertz, TX 78154	⁷ Authouzed	Adkins, TX 78101
Person		Person	
Other	Other	7Other	COther
Manager	Name	")Manager	Name.
Member	Address	¹³ Member	Address
Vothanzed		□Authorized	
Person		Person	
ROther		DOther	BOther
Манарет	Name	[]Manager	Name.
Member	Address	[Member	Address.
Anthonzed		⊒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. Non-indexed individuals may be added to the index when (Illing 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 autisatement 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 translater must be submitted).
- (9). This document is executed in accordance with section 605,0203 (4) (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.847,155. F.S.

 Jose Cadera	
Signature of an authorized person	-
Lance Oranie and	(((H23000263362 3)))
 Jose Cadena	
 * Charles and an indext of single of speniers	

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State (((H23000263362 3)))

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for RHINO IRRIGATION AND LANDSCAPE SERVICES LLC (file number 804418875), a Domestic Limited Liability Company (LLC), was filed in this office on February 04, 2022.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 27, 2023.



Phone, (512) 463-5555

Prepared by: SOS-WEB

gave Helson

Jane Nelson Secretary of State

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TID: 10264

Dial: 7-1-1 for Relay Services Document: 1270287790002