# M23000015937

(Requestor's Name)
(Nequesions Marile)
(Addition)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special monocions to raining officer.





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December 12, 2023

SHANNON NELSON 308 MARKET ST SE ROANOKE, VA 24011 US

SUBJECT: CREATIVE FINANCING SOLUTIONS LLC

Ref. Number: W23000165479

We have received your document for CREATIVE FINANCING SOLUTIONS LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 923A00028300

STANTON H ROBERTS Regulatory Specialist III

www.sunbiz.org

### COVER LETTER

TO:

Registration Section

	Creative Financing Solutions LLC				
SUBJECT:					
	Nan	ne of thinned Liability Company			
The enclosed Existence, a	d "Application by Foreign Limited Liability nd check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate o referenced foreign limited liability company to transact business in Florida			
Please return	all correspondence concerning this matter	to the following:			
	Shannon Nelson				
		Name of Person			
	Creative Financing Solutions LLC				
	Firm/Company				
	308 Market St SE				
	<u> </u>	Address			
	Roanoke, VA 24011				
	(	Tity-State and Zip Code			
	snelson@alcova.com				
	E-mail address: (to b	e used for future annual report notification)			
For further is	nformation concerning this matter, please ea	ill:			
Shannon Nelson		540 204-9445 at ()			
	Name of Contact Person	at () Area Code Daytime Telephone Number			
	iling Address:	Street Address:			
•	gistration Section	Registration Section			
	vision of Corporations	Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
Tai	lahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Plea	losed is a check for the following amount: use make check payable to: FLORIDA DEI				
□ 9	3125.00 Filing Fee 💢 \$130,00 Filing Fe Certificate o				

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

IN COMPLIANCE WITH SECTION (0)5.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Creative Financing Sc (Name of Foreig	n Lunited Liability Company; must include "Limit	ed Liability Co	ompany," "L.L.C.," or "LLC.")		
CFS LLC					
If name unavailable, enter alternate	name adopted for the purpose of transacting business in I	lorida. The alter	nate name must include "Limited Liability	Company," "L.L.C," at "LLC	
Virginia 2.			1886719		
(Jurisdiction under the law of	which foreign limited liability company is organized)	.'	3. (Fbi mumber, il applicable)		
13/15/2023					
	(Date first transacted business in Florida, if prior to (See sections 605-0904 & 605,0805, F.S. to determ	registration i nuc penalty habi	htys		
308 Market St SE			8 Market St SE		
Street Address of Principal Office)		6	(Mailing Address)		
Roanoke, VA 24011		Ro	anoke, VA 24011		
		•		83	
. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acce	ptable)		
Name:	InCorp Services, Inc.				
Office Address:	3458 Lakeshore Dr		<del></del>	<u></u>	
	Tallahassee		32312 Florida		
	(Cuy)		1/19 (ode)		

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 registered agent.

Rebecca Hanson Attorney-in-fact for InCorp Services, Inc.
(Registered agent's signature)

A Explanation indexing proposes, discrimines into or capacity and addresses of the petinary of inhers managers of persons authorized to mistage, up to six (o) total.

Litte or Capacin		<u> Title or Capacity</u>	2 Name and Address:
⇒ ½ fp.q. <sub>Q</sub> i.e.	Name Robert Lindstrona	∰ Manager	Sund William Sten.
≡ Manten	Address ** ** ** ** ** ** ** ** ** ** ** ** *	<b>⊞</b> Man oer	Nadress National Nation On SE
D'Authorized	Rospoke, VA 24018	II Author zed	Roanoke, VA 246,74
P 181		Person	
Potter	Other		Louher .
• Manager	Name Bobby Nicely	Manager	Name
Member	Address 1426 Smith Creek Rd	L Menr er	Address
?Auhorzed	Christiansburg, VA 24073	** , ,	
Parser,			
(Phaet	_Other		0965
Manager	Name	.Manage:	Notik
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Mier	_ Univer		Otto:

Impation Notice, Use an arrachment to report more than strotty. The arrachment will be imaged to reporting purposes only. Some indexed individuals may be added to the index when thing you. For da Department of Sare August Report form

Whened is a certificate of existence, no mere than moray coal, duly terroricine to the efficiel having cestory of records in integration under the law of which it is organized affiliate enrichments of the final function must be submitted.

10. This document is executed in accordance with section 60 (120). Trabe a long a statut, s. Fan . where that any taise adoption submitted in a document to the Department of State constit fees to be force to leave to provided for in \$ 8 \left( 125 \rightarrow 8).

Signature of the State of the S

# Commonwealth of Hirginia



## State Corporation Commission

#### CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That Creative Financing Solutions LLC is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on June 20, 2022; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

November 13, 2023

Bernard J. Logan, Clerk of the Commission