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LLC-5 **Secretary of State** Application to Register a Foreign Limited

Liability Company (LLC)

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filing Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the

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-FILED-

File No.: 202565311279 Date Filed: 1/6/2025

California Franchise Tax Board each year. For more information https://www.ftb.ca.gov/ .	, go to	This Space For Office Use Only				
1a. LLC Name (Enter the exact name of the LLC as listed on your at	tached Certificate of Good St				<u> </u>	
Coastal Breeze Home, LLC						
1b. California Alternate Name, If Required (Only enter an a	Itemate name if the LLC nam	e in 1a not available	in California.)		
		TOTOTTO IS IT A INC.				
2. LLC Jurisdiction (Ensure that the jurisdiction matches the atta		nding.)				
a. Jurisdiction (State, foreign country or place where this LLC is formed	•					
	Texas					
b. Authority Statement (Do not alter Authority Statement)						
This LLC currently has powers and privileges to conduct b	usiness in the state, for	eign country or p	place enter	ed in Ite	m 2a	
3. Business Addresses (Enter the complete business address	es. Items 3a and 3b cannot be	e a P.O. Box or "in c	are of" an ind	ividual or	entity.)	
a. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbreviations)	City (no abbreviations)		Zip Code		
1105 Manlove St	Austin			78741		
b. Street Address of Principal Office in California, if any - Do not enter a P.O.	''			Zip Code		
376 Corral de Tierra Rd	Salinas	Salinas			93908	
c. If the Mailing Address is the same as item 3a or 3b, check the applicable b						
d. Mailing Address - if different than item 3a or 3b	City (no abbreviations)	City (no abbreviations)		State Zip Çode		
4. Service of Process (Must provide either Individual OR Corpor INDIVIDUAL — Complete Items 4a and 4b only. Must include agent	•	eet address.		•		
a. California Agent's First Name (if agent is not a corporation) Jordan	Middle Name	Last Name Peana			Suffix	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 376 Corral de Tierra Rd	City (no abbreviations) Salinas		State CA	Zip Code 93908		
CORPORATION - Complete item 4c only. Only include the name of	of the registered agent Corpor	ation.	\ <u></u>			
c. California Registered Corporate Agent's Name (if agent is a corporation) –	Do not complete Item 4a or 4b					
5. Read and Sign Below (Title not required.)						
By signing, I affirm under penalty of perjury that the information	ation herein is true and	correct and that	I am author	rized to	sign	
on behalf of the foreign LLC.					J	
totes leaves	Stefan Pea	na				
Signature	Type and Pri					

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 Coastal Breeze Home, LLC (file number 805793797), a Domestic Limited Liability Company (LLC), was filed in this office on November 21, 2024.

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 December 31, 2024.



Jane Nelson Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at https://www.sos.texas.gov/

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Dial: 7-1-1 for Relay Services

Document: 1438489820003