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COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	CT: Torrecom Partners LLC
	Name of Limited Liability Company nelosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of nee, 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:
	Eduardo Roman
	Name of Person
	Torrecom Partners LLC
	Firm/Company
	1820 N Corporate Lakes Boulevard, Suite 304,
	Address
	Address Weston, FL 33326 City/State and Zip Code
	City/State and Zip Code
	eroman@torrecom.com
	E-mail address: (to be used for future annual report notification)
For fur	rther information concerning this matter, please call:
	Eduardo Roman 954 801-5234
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations STREET ADDRESS: Division of Corporations Registration

Registration Section

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

Tallahassee, FL 32314

Section

P.O. Box 6327

★ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Certificate of Status Certified Copy of Status & Certified Copy FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS	APPLICATION BY
IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	TO REGISTER A
I. TORRECOM PARTNERS LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(It name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability C	Company," "L.L.C," or "LLC.")
2. <u>Delaware</u> 3. <u>EIN 27-1982292</u>	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if ap	plicable)
411/15/2017	
(Date first transacted business in Florida, if prior to registration,) (See sections 605 0904 & 605,0905, F.S. to determine penalty liability)	
5. 1820 N Corporate Lakes Boulevard, Suite 304 6. 40 Woodland Street	
(Mailing Address)	
Weston, FL 33326 Hartford, CT 06105	
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Eduardo J Roman	TILED TILED
Office Address: 1820 N Corporate Lakes Boulevard, Suite 304	A III SH
Weston Florida 33326	- -
(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 designated in this application, I hereby accept the appointment as registered agent and agree to act in this to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and accept the obligations of my position as registered agent. (Registered agent's signature)	capacity. I further agre
Composition against Ag	
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address:	me and Address:
Maria Scotti, Chief Executive Officer and Managing Partner 40 Woodland Street Hartford, CT 061	05
Eric Zachs Co-Chairman and Managing Partner 40 Woodland Street Hartford, CT	06105
Roberto Woldenberg Co-Chairman and Managing Partner: 40 Woodland Street Book	and CT 04105

- 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.

Maria Scotti (Chief Executive Officer and Managing Partner)

Typed or printed name of signee

athorized person



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TORRECOM PARTNERS LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE ELEVENTH DAY OF DECEMBER, A.D. 2017.





Authentication: 203731678

Date: 12-11-17

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