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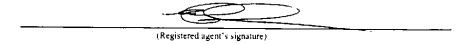
# **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJE	GREEN ROME, LLC	
	Name of Limited Liability Company	
	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifica e, and check are submitted to register the above referenced foreign limited liability company to transact business in Flo	
Please	turn all correspondence concerning this matter to the following:	
	FERNANDO M. SOCOL	
	Name of Person	
	FERNANDO M. SOCOL, PA	
	Firm/Company	
	201 S. BISCAYNE BLVD., STE 905	,
Address		
	MIAMI, FL 33131	
	City/State and Zip Code	
	GABRIELA@SOCOLLAW.COM	İ
	GABRIELA@SOCOLLAW.COM  E-mail address: (to be used for future annual report notification)	
For fur	er information concerning this matter, please call:	
	FERNANDO SOCOL 786 272-7100 at ( )	
	Name of Contact Person Area Code Daytime Telephone Number	
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE	
	S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy of Status & Certified Copy	

### 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 BUSINESS IN THE STATE OF FLORIDA: GREEN ROME, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") NORTH CAROLINA 30-1168120 (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5371 SW 38TH AVE 5371 SW 38TH AVE (Street Address of Principal Office) (Mailing Address) FORT LAUDERDALE, FL 33312 FORT LAUDERDALE, FL 3331 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) FERNANDO M. SOCOL, PA Name: 201 S. BISCAYNE BLVD., STE 905 Office Address: MIAMI Registered agent's acceptance: Having been numed 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.



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: Name: BIGIO, Micaela KOSTOVETSKY, Martin Manager Manager Address: 5371 SW 38TH AVE 5371 SW 38TH AVE **■**Member Member FORT LAUDERDALE, FL 33312 FORT LAUDERDALE, FL 33312 Authorized Authorized Person Person Other Other Other Other Manager | Manager Name: \_\_\_ Member Member Address: Address: \_\_\_ Authorized Authorized Person Person []Other\_ Other\_\_\_\_ Other\_ ■Manager ☐ Manager ☐ Member Address: Member 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. Nonindexed 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.

Esped or printed name of signee

Martin Kostovetsky



# NORTH CAROLINA Department of the Secretary of State

# CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

## GREEN ROME LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 18th day of February, 2019

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 29th day of May, 2019.

Elaine I Marshall

Secretary of State