

M23000002097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

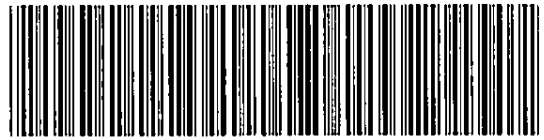
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. FRANKLIN

FEB 16 2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sunset Vista Retreat 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:

Elizabeth Roach

Name of Person

Sunset Vista Retreat LLC

Firm/Company

670 Ives Road

Address

East Greenwich, RI 02818

City/State and Zip Code

theodicy@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth Roach

401

864-1622

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate 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:

Sunset Vista Retreat 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.")

Rhode Island

92-1538056

(Jurisdiction under the law of which foreign limited liability company is organized)

3. (FEI number, if applicable)

No Business has begun

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

670 Ives Road

same

Street Address of Principal Office)

6. (Mailing Address)

East Greenwich, RI 02818

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Dave Riby- Vacation Villas 400

Office Address: 1411 Lexington Avenue

Davenport, Florida 33837
(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 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.

D. Riby

MANAGER

(Registered agent's signature)

2015 FEB 10 5 P.M. 14

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: Manager **Name and Address:** Name: Elizabeth Roach
 Address: 670 Ives Road
 East Greenwich, RI 02818
 Person
 Other

Title or Capacity: Manager **Name and Address:** Name: Paul Dickinson
 Address: 670 Ives Road
 East Greenwich, RI 02818
 Person
 Other

Manager **Name and Address:** Name: Dave Riby
 Address: 1411 Lexington Avenue
 Davenport, FL 33837
 Person
 Other

Manager **Name and Address:** Name: Liz Riby
 Address: 1411 Lexington Avenue
 Davenport, FL 33837
 Person
 Other

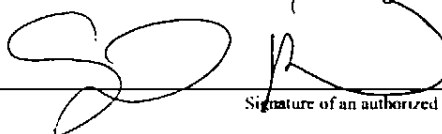
Manager **Name and Address:** Name: _____
 Address: _____
 Person
 Other

Manager **Name and Address:** Name: _____
 Address: _____
 Person
 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 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.



 Signature of an authorized person

Elizabeth Roach

Typed or printed name of signee



State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, Secretary of State

CERTIFICATE OF GOOD STANDING

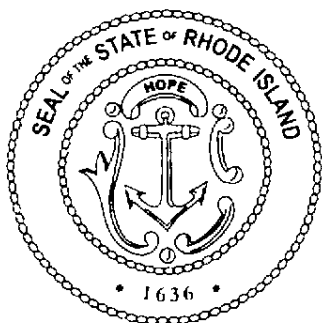
I, Gregg M. Amore, Secretary of State and custodian of the seal and corporate records of the State of Rhode Island, hereby certify that:

Sunset Vista Retreat, LLC

is a Rhode Island Limited Liability Company organized on **January 04, 2022**.

I further certify that revocation proceedings are not pending; articles of dissolution have not been filed; all annual reports are of record and the company is active and in good standing with this office.

This certificate is not to be considered as a notice of the company's tax status, financial condition or business practices; such information is not available from this office.



SIGNED and SEALED on

January 25, 2023

Secretary of State

Certificate Number: 23010090270

Verify this Certificate at: <http://business.sos.ri.gov/CorpWeb/Certificates/Verify.aspx>

Processed by: dantonelli