B18000000292

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(ON) State P. Hone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
,				
Cartifical Coning Cartification of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



300320454593

SECRETARY OF STATE TALLAHASSEE, FL

11/02/18--01007--013 **973.75

11/02/18--01007--010 **87.50

ALLASE SET TORIDA

S. PRATHER

COVER LETTER

TO: Registration Secti Division of Corpo	on vertions			
SUBJECT: LO	Jowell Avwer of Foreign Limited Partne	ican Service	Limited Partnership	
The enclosed application, opartnership to transact bus	certificate of status and fee	s are submitted to register a	a foreign limited partnership or limited liability limite	ed
Caroli	en Pesci			
Rockett Rocket	Contact Person Sewices Firm/Company	td.		
	Firm/Company NW Quail La			
Terrebor	Address 100, Oregon y. State and Zip Code	91760		
Carolyn(a E-mail address: (Nobe us	y, State and Zip Code () pas usa . c. sed for future annual report	ovy		
For further information co	oncerning this matter, pleas	e call:		
Carolun Name of Contac	Pesci 1 Person	at (832) L Area Code and Dayti	he Telephone Number	
Enclosed is a check for th	e following amount:			
☐ \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	□ \$1,008.75 Filing Fees and Certificate of Status	© \$1,052.50 Filing Fees and Certified Copy	Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Cl Tallahassee, FL 32301	írcle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

1. Pockwell American Services, Ltd
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited. L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.
2. 1/1/2006 S
State or Country of Formation 4. Federal Employer Identification Number: 20-3689253
5. Name of Registered Agent for Service of Process and Florida Street Address:
5148 Point Shows LN
GulfiBreeze, FL 32563
6. I hereby accept the appointment as registered agept 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.
Signature of Registered Agent
7. Principal Office: Rockwell American Services 10649 NW Quail Rd
10849 NW Quail Rd. Terrebonne Oregen 97760
Terrebonne Oregon 97760
9. If limited partnership is a limited liability limited partnership, check box.
10. Name, principal office address, and mailing address of each general partner:
Name of General Partner: Caroluh Pescii Name of General Partner: Raumond Borene
Street Address: 10649 NW Quict RD Street Address: 10849 NW Quigit Rd.
Terrebonne OR 97760 Terrebonne OR 97760
Mailing Address: Serve Mailing Address: Serve
Name of General Partner: Li 29 Little Name of General Partner: Sric Little
Street Address: 12 1000 NW Quai 1 Rd Street Address: 8578 NW 18Th St.
Terrebonne OR 979 60 Terrebonne OR 97760
Mailing Address: Same Mailing Address: 5600

Name of General Partner:	1 of 2 Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
11. Effective date, if other than the date of filing: ///// (Effective date cannot be prior to nor more than 90 days after the date.)	2018 te this document is filed by the Florida Department of State.)
12. Attached is a certificate of existence duly authenticated, not more Florida Department of State, by the Secretary of State or other official the law of which it is organized.	Il having custody of the entity's records in the jurisdiction under
Signed this Hoventhen day of Hoventhen	
Signature of a	general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.\$17.155, F.S.

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

Page 2 of 2

. . .

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Rolando B. Pablos Secretary of State

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 Limited Partnership for Rockwell American Services. Ltd. (file number 800561802), a Domestic Limited Partnership (LP), was filed in this office on October 25, 2005.

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 November 02, 2018.





Rolando B. Pablos Secretary of State

Dial: 7-1-1 for Relay Services Document: 847246110003