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(I	Requestor's Name)				
(Address)	<u></u>			
(i	Address)				
(1	City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of	Status			
Special Instructions to Filing Officer:					
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SECRETARY OF STATE



TO: **New Filing Section** Division of Corporations

ROCKY SUB S CORP., INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Certificate of Status

Please return all correspondence concerning this m	latter to the following:
KRISTINA RENDE	
Name	e of Person
IMPALA PARTNERS, LLC	
Firm/	Company
18 MARSHALL STREET	
A	Address
NORWALK, CT 06854	
City/Sta	ate and Zip code
krende@impalallc.com 🗸	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, ple Kristina Rende at (203	ο ορε οργε Σ Ε Δ
STREET/COURIER ADDRESS: New Filing Section	MAILING ADDRESS: New Filing Section Physician of Companyions
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee &	☐ \$78.75 Filing Fee & ■ \$87.50 Filing Fee,

Certified Copy

Certificate of Status &

Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

, ROCKY S	SUB S CORP., INC.				
	rporation; must include "INCORPORAT rp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		_
		,			
(If name unavailal	ble in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting bus	iness in Florida))
_{2.} DELAWARE		_ 3.	_{3.} 46-1681913		
(State or country under the law of which it is incorporated)		_	(FEI number, if applicable)		
4. DECEMBER 26, 2012		5.	_{5.} PERPETUAL		
(Date of	of incorporation)		(Duration: Year corp. will cease to exist	t or "perpetual")	_
6.					
•			n Florida, if prior to registration) 502, F.S., to determine penalty liability)		_
₋ 928 SEAS			EACH, FLORIDA 33483	3	
/. <u></u>	(Principal office				_
928 SEAS	AGE DRIVE, DELRAY B	E/	ACH, FLORIDA 33483		
	(Current mailing	add	ress)		
INIVESTIA					
8. INVESTIN			ountry to be carried out in state of Florida)		
	•		·		
9. Name and street	address of Florida registered agent:	(P.0	D. Box <u>NOT</u> acceptable)	هين اس	
Name:	PAUL A. STREET				
Office Address:	928 SEASAGE DRIVE	<u> </u>		芸術と	五二日
	DELRAY BEACH		, Florida 33483	SEE A	_ED
	(City)		(Zip code)	755 -	
10. Registered age	ent's acceptance:		•	第2 5 5 6	
			ice of process for the above stated con		
designated in this d	application, I hereby accept the appo mnly with the provistons of all status) inti tes 1	ment as registered agent and agree to relative to the proper and complete po	: act in this cap erformance of	oacity. mv
duties, and I am fa	miliar with and accept the obligation	ns o	f my position as registered agent.	,	
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		_		
	Registered agent	t's s	enature)		

^{11.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: VALERIE C. STREET Address: 928 SEASAGE DRIVE DELRAY BEACH, FL 33483 Vice Chairman: Address: _ Address: **B. OFFICERS** President: VALERIE C. STREET Address: 928 SEASAGE DRIVE DELRAY BEACH, FL 33483 Vice President: _____ Address: VALERIE C. STREET Address: 928 SEASAGE DRIVE, DELRAY BEACH, FL 33483 Treasurer: VALERIE C. STREET Address: 928 SEASAGE DRIVE, DELRAY BEACH, FL 33483 NOTE; If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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. 14. VALERIE C. STREET, PRESIDENT & CEO

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ROCKY SUB S CORP., INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF

JUNE, A.D. 2013.

13 JUL -9 PM 1: 58
SECRETARY OF STATE
TALL VERSEE FLORIDA

5266178 8300

130788860

AUTHENTICATION: 0548064

DATE: 06-27-13

Jeffrey W. Bullock, Secretary of State

You may verify this certificate online at corp.delaware.gov/authver.shtml