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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: ROCA Solutions, Inc	RSI
	tion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact bu	
Please return all correspondence concerning this ma	atter to the following:
L. George Leonard	
Name	of Person
L. George Leonard, CPA PA	
Firm/C	Company
1485 N Atlantic Ave Suite 102	
A	ddress
Cocoa Beach, FL 32931	
· .	te and Zip code
igl@lglcpafirm.com	
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, plea	ise call:
1 Coorgo Loopard 221	700 1601
L. George Leonard at (321	
Name of Person A	rea Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section 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 & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status of 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.

	•	e adopted for the purpose of transacting business in Flo	orida)
Texas	3	46-5044483	
·	under the law of which it is incorporated)	(FEI number, if applicable)	
9/20/201	<u>) </u>	perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "perpet	ual")
3/10/201	1		
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
45 Crysta	River Drive Cocoa Beacl	h, FL 32931	
	(Principal office add	dress)	
- · · · · · · · · · · · · · · · · · · ·	(Current mailing add	dress)	
/D/-) of corporation authorized in home state or c	ountry to be carried out in state of Florida)	
UPIIIMASAIS) or corporation authorized in nome state or c	ountry to be curried out in state of Frontally	
	t address of Florida registered agent: (P.	<u> </u>	ع سد
	t address of Florida registered agent: (P. L. George Leonard, CPA	<u> </u>	14 11
Name and street		PA	14 HAR 26
Name and street	L. George Leonard, CPA	PA SECHETAR	14 HAR 26 PI
Name and stree	L. George Leonard, CPA 1485 N Atlantic Ave Ste	PA	14 HAR 26 PH 3:

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: Vice Chairman: Address: Director: __ Address: _ Director: Address: ___ **B. OFFICERS** President: Olivia Fuentes Address: 45 Crystal River Drive Cocoa Beach, FL 32931 Vice President: Address: ____ Secretary: Olivia Fuentes Address: 45 Crystal River Drive Treasurer: Cocoa Beach, FL 32931 Address: 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. Olivia

(Typed or printed name and capacity of person signing application)

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



Office of the Secretary of State

CERTIFICATE OF FILING

ROCA Solutions Inc. (RSI) 801319957

[formerly: Research Opportunities Collaboration Associates, Inc.]

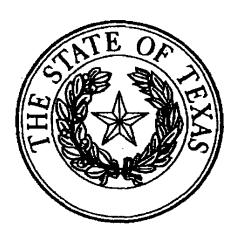
The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Amendment for the above named entity has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 03/10/2014

Phone: (512) 463-5555

Effective: 03/10/2014



NANDITA BERRY

Nandita Berry Secretary of State