F/80000024244

(Requestor's Name)	
(Address)	•
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Busiliess Elluty Maille)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

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COVER LETTER

TO:	O: Registration Section Division of Corporations				
SUBJI	ECT: Tony R	overe Consulting, Inc.			
			tion - must include s	uffix	
Dear Si	ir or Madam:				
"Certif	icate of Existence	- •	Standing" and check	Transact Business in Florida," are submitted to register the	
Please	retum all corres _i	ondence concerning this ma	atter to the following	; ;	
George	Sleeman				
		Name	of Person	·	
Tax Ma	an To You, LLC				
		Firm/0	Company		
2930 N	I Academy Blvd	Suite 205			
		Α	idress		
Colora	ado Springs, (
		City/Sta	te and Zip code		
salesta	x@taxmantoyou		1.6.6.		
		E-mail address: (to be us	ed for future annual	report notification)	
For fur	ther information	concerning this matter, plea	se call:		
Tony Rovere at (631		₎ 816-1377			
,	Name of Perso		/ _	e Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			Regist Divisio P.O. B	ration Section on of Corporations ox 6327 assee, FL 32314	
Enclose	ed is a check for	the following amount:			
□ \$70	.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing I 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.

I. Tony Rovere C	Consulting, Inc.		<u> </u>	
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORAT	rion."	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transa	acting business in Florida)	
2. New York	New York 3 814288171		3. 814288171	
(State or countr	y under the law of which it is incorporated)	(FEI number,	if applicable)	
4. 11/1/2016	5			
	of incorporation)	(Date of duration, if o	ther than perpetual)	
6. 04/01/2018				
7. 34 Roderick Rd	(SEE SECTIONS 607.1501 & 607.1501 (SEE SECTIONS 607.1501 & 607.1501)	in Florida, if prior to registration) 1502, F.S., to determine penalty li ipal office address)		
2030 N Academ	ny Blvd Suite 205 Colorado Springs, CO 8	•		
2530 N Academ		ing address, if different)	2 P.M.	
8. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	PH 12: 57	
Name:	Registered Agents Inc.		第三 5	
Office Address:	3030 N. Rocky Point Dr. STE 150A		1	
	Tampa	, Florida <u>33607</u>	_	
	(City)	(Zip code)		

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Registered Agents Inc.

Bill Havre - Assistant Secretary

(Registered agent's signature)

10. 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.

FILED

18 MAY 21 PH 12:57

11. Names and business addresses of officers and/or directors:

A. DIRECTORS	13/6/5/40V and 12:
Chairman:	- CHANGE STAIR
Address:	1 (1970) <u>.</u>
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Tony Rovere	
Address: 34 Roderick Rd. West Islip, NY 11795	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the a	uplication listing additional officers and/or directors
. 1 /	- PLESIDENT
Signature of Dir. The officer or director signing this document (and who is lis	ector or Officer
13. Tony Rovere - President	

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of TONY ROVERE CONSULTING, INC. was filed on 10/31/2016, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



**



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 17th day of April two thousand and eighteen.

Brendan W. Fitzgerald

Executive Deputy Secretary of State