

F18000003179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

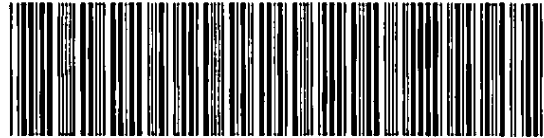
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with ERIK ROFE 7/11/18
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CLERK OF SUPERIOR COURT

← SALY
JUL 11 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROFE GROUP 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.

Please return all correspondence concerning this matter to the following:

ERIK ROFE
Name of Person

ROFE GROUP INC
Firm/Company

1109 NE 2nd AVENUE
Address

DELRAY BEACH, FL 33444
City/State and Zip code

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

For further information concerning this matter, please call:

Erik Rofe at (908) 337-9966
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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 & Certified Copy ☐ \$87.50 Filing Fee, 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.

1. ROFE GROUP INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. TENNESSEE 3. 65-1173763
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/18/2002 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. MAY 1, 2018
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1109 NE 2nd AVE DELRAY BEACH FL 33444
(Principal office address)

(Current mailing address, if different)

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

Name: ERIK ROFE

Office Address: 1109 NE 2nd AVE

DELRAY BEACH, Florida 33444
(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.

X Erik Rofe
(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.

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

A. DIRECTORS

Chairman: ERIK ROFE

Address: 1109 NE 2nd AVENUE
DELRAY BEACH FL 33444

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: ERIK ROFE

Address: 1109 NE 2nd AVENUE
DELRAY BEACH FL 33444

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. ☒

Erik Rofe

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. _____

ERIK ROFE

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

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STATE OF FLORIDA
DEPARTMENT OF STATE



Tre Hargett
Secretary of State

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SECRETARY OF STATE
NASHVILLE, TENNESSEE

**Division of Business Services
Department of State**

State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

SLATKY & SLATKY CPAS PC
STE 9
100 VETERANS BLVD
MASSAPEQUA, NY 11758-4913

June 25, 2018

Request Type: Certificate of Existence/Authorization

Request #: 0281042

Issuance Date: 06/25/2018

Copies Requested: 1

Document Receipt

Receipt #: 004154559

Filing Fee: \$20.00

Payment-Check/MO - SLATKY AND SLATKY CPAS, P.C., MASSAPEQUA, NY

\$20.00

Regarding: ROFE GROUP INC

Filing Type: For-profit Corporation - Domestic

Control #: 436814

Formation/Qualification Date: 11/18/2002

Date Formed: 11/18/2002

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

ROFE GROUP INC

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

Processed By: Nichole Hambrick

Verification #: 028430932