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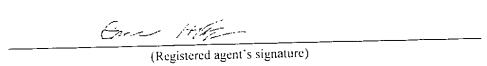
TO: Registration Section Division of Corporations			
SUBJECT: Rove Ventures Inc.			
Na Na	me of corporation - m	iust include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreig "Certificate of Existence," or "Certificate above referenced foreign corporation	cate of Good Standin	g" and check are submitt	usiness in Florida." ed to register the
Please return all correspondence cond	cerning this matter to	the following:	
Sheridan DeJong			<u></u>
	Name of Per	son	
BrownWinick Law Firm		<u> </u>	
	Firm/Compar	ıy	
666 Grand Ave., Suite 2000			
	Address		
Des Moines, IA 50309			
	City/State and	Zip code	
sheridan.dejong@brownwinick.com		·	
E-mail ad	dress: (to be used for	future annual report notif	fication)
For further information concerning t	his matter, please call	:	
Sheridan DeJong at (515) 242-2478			
Name of Person	Area Code	Daytime Telephon	ic Number
STREET/COURIER ADD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303		MAILING ADD Registration Sect Division of Corpe P.O. Box 6327 Tallahassee, FL	ion orations
	DA DEPARTMENT OF Filing Fee & 💎 🗆 S	F STATE 578.75 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.

(Enter name of cor	poration; must include "INCORPORATED," "	COMPANY." "CORPORATIO	N.		
"Inc" "Co" "Cor	p." "Inc." "Co." or "Corp.")				
(If name unavailab	ole in Florida, enter alternate corporate name ad	opted for the purpose of transaction	ng business	in Florid	a)
	80	6-2074335			
/Santa as assume	country under the law of which it is incorporated) (FEI number, if applicable)		pplicable)		
(State of country	dider die law vi viii and a				
2/10/2021	5 5	(Date of duration, if other than perpetual)			
(Date o	of incorporation)	,			
	(Date first transacted business in I	Florida, if prior to registration)	lina)		
	(SEE SECTIONS 607.1501 & 607.150	2. F.S., to determine penalty liabi	nty)		
69 Madison Ave	nue, #2028, New York, NY 10016				
	(Principal office	e <u>street</u> address)			
	(Current mailing	address, if different)	**	202	
			12	2022 SEF	r.2**
Name and stree	t address of Florida registered agent: (P.O.	Box NOT acceptable)		7 2	
	Eric Hanig			2	
Name:	10 10 W	_ _		PX	
ffice Address:	12872 Degas Drive W				
	Palm Beach Gardens	, Florida <u></u>		ب 2	
	(City)	(Zip code)			

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.



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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

A. DIRECTORS				
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□ Vice Chairman	Address:	
□Director	New York, NY 10016	Director		
President		□President		
□Vice President		□Vice President		
□ Secretary	□Treasurer	□Secretary		☐Treasurer
Other	Other	Other		□Other
□ Chairman	Name:	□Chairman	Name:	
□ Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		. <u>.</u>
□Vice President		□ Vice President		
☐ Secretary	Treasurer	□ Secretary		□Treasurer
□Other	□Other	□Other	***	□Other
	Name:	□Chairman	Name:	
	Address:	Director		
□Director		_		
□President		☐ President		
□Vice President		□ Vice President		
☐ Secretary	□Treasurer	☐ Secretary		☐Treasurer
□Other	Other	□Other		□Other
individuals may b	Use an attachment to report more than six (6). The abe added to the index when filing your Florida Depart	ment of State Annual I	кероплотт.	
12	Javah Hanij U Signature of Directo	05		
The officer or dishe is aware that s.817.155, F.S.	rector signing this document (and who is listed in nun false information submitted in a document to the Dep	nber 11 above) affirms partment of State consti	that the facts sta tutes a third deg	ted herein are true and that he or ree felony as provided for in
13.	(Typed or printed name and capacity of p	erson signing application	on)	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ROVE VENTURES 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-NINTH DAY OF JULY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROVE VENTURES INC." WAS INCORPORATED ON THE TENTH DAY OF FEBRUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

TANG OF THE PROPERTY OF THE PR

Authentication: 204043847

Date: 07-29-22