# F 230000 81343

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:  2/8/23  4
m of the

Office Use Only



900401431919

02/01/23--01011--004 \*\*78.75

RECENCED

S. FRANKLIN MAR - 8 2023

# **COVER LETTER**

	tration Section ion of Corporation	ns				
SUBJECT:	ROCKS, ROOTS	S & WATER, IN	C.			
SUBJECT.		Name of co	rporation -	must include suffix		_
Dear Sir or M	adam;					
"Certificate o.	"Application by f Existence," or " ced foreign corpo	Certificate of C	lood Standi	uthorization to Transacing" and check are submin Florida.	Business in Florida," nitted to register the	
Please return	all correspondent	e concerning th	nis matter to	the following:		
JONATHAN	D BUNT				_	
		·	Name of Po	erson	L.C.	_
ROCKS, ROC	OTS & WATER, IN	NC		, ,		
		1	irm/Comp	any	رتت ا	
102 RIVIERA	DUNES WAY		_			<u></u>
			Address	S	-	- - -: >: <u>-</u>
PALMETTO,	FL 34221					ر. <u>لـــ</u> ــ
·		Ci	ty/State and	I Zip code		
JDBUNT@G						
	E-n	nail address: (to	be used for	r future annual report n	otification)	
For further in	formation concer	ning this matte	r, please ca	11:		
JONATHAN	D. BUNT	at (	203	788-2330		
Nam	e of Person		Area Code	Daytime Teleph	one Number	
Regis Divis The C 2415	EET/COURIER stration Section tion of Corporatio Centre of Tallaha N. Monroe Stree hassee, FL 3230	ons ssee et, Suite 810		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection rporations	
Enclosed is a Please make cl ☐ \$70.00 Fil	_	lowing amount LORIDA DEPA 78.75 Filing Fe Certificate of St	RTMENT C	OF STATE \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Star 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.

(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting busine	ess in Florid	
		14 1002707		
(State or country 3/29/2007	under the law of which it is incorporated)	(FEI number, if applicable		
(Date of incorporation)		(Date of duration, if other than perpetual)		
102 RIVIERA D	UNES WAY, PALMETTO, FL 34221 (Principal of	fice street address)		
			0.7	
	(Current mail	ing address, if different)	· .	
Name and stree	t address of Florida registered agent: (P.	O. Box NOT acceptable)		
Name:	JONATHAN D. BUNT			
Office Address:	102 RIVIERA DUNES WAY			
	PALMETTO	. Florida		
	(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.

(Revisional grant'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.

A. DIRECTORS				
□Chairman	Name. JONATHAN D. BUNT	□ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	PALMETTO, FL. 34221	□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		
∐Vide President		□Vice President		
☐ Secretary	☐ Treasurer	□Secretary	□Treasurer	
Other	Other	□Other		
			1 C-	
□Chairman	Name:	□Chairman	Name:	
TiVice Chairman	Address:	7Vice Chairman	Address:	
Director		☐ Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	☐ Treasurer	⊡Secretary	Treasurer	
□Other		□Other	□Other	
Important Notice: Unidividuals may be	See an attachment to report more than six (6). The at added to the index when filing your Florida Department of Director Signature of Director	nent of State Annual Rep	I for reporting purposes only. Non-indexed port form.	
she is aware that fa \$817.155, F.S.	tor signing this document (and who is listed in numble information submitted in a document to the Depart D. BUNT. PRESIDENT	per 11 above) affirms tha	it the facts stated herein are true and that he or ies a third degree felony as provided for in	

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

## STATE OF NEW YORK

## DEPARTMENT OF STATE

## Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:

ROCKS, ROOTS & WATER, INC.

DOS ID Number:

3496699

**Entity Type:** 

DOMESTIC BUSINESS CORPORATION

**Entity Status:** 

**EXISTING** 

Date of Initial Filing with DOS:

03/29/2007

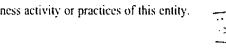
**Statement Status:** 

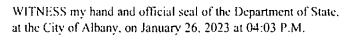
**CURRENT** 

Statement Due Date:

03/31/2023

No information is available from this office regarding the financial condition, business activity or practices of this entity.





ROBERT J. RODRIGUEZ, Secretary of State

OF NEW OF NEW OF STREET, STREE

Brandon Cr Heyles

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100002870950 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <a href="http://ecorp.dos.ny.gov">http://ecorp.dos.ny.gov</a>