# F24000005732

(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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(Bu	ışiness Entity Name)	
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Special Instructions to Fili	ng Officer:	
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Office Use Only



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APPROVED AND FILED

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## FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR TALLAHASSEE, FL 32309

EXAMINER'S INITIALS:\_\_\_\_

(850) 491-9625 Brandon (850) 524-5437 Teresa (850) 524-6243 Rich

Please use funds	from accour	nt: 120210000160: \$87.50
Authorization Sig		
Business Name: Document #  _XCertified Co _XCertificate o	ру	Appliances, Inc.
NEW FILINGS	&	<u>AMENDMENTS</u>
Profit Corp Not for Profit Limited Liability Domestication LLLP Corp Inc Other		AmendmentResignation / DissociationChange of Registered AgentDissolution for LLCMergerArticles of ConversionAmended & Restated Articles of IncorporationStatement of Correction
APOSTILLE(s)	&	OTHER FILINGS
Apostille(s) Country(s)		_XForeign Filing INCReinstatementQualificationFictitious NameAnnual Report

### **COVER LETTER**

TO: Registration Se Division of Co			
SUBJECT: Royal Gr	reen Appliances, Inc.		
30bjec1	Name of corporation	on - must include suffix	
Dear Sir or Madam:			
"Certificate of Existen	tion by Foreign Corporation foce," or "Certificate of Good St gn corporation to transact busin	anding" and check are sub-	
Please return all corres	pondence concerning this matt	er to the following:	
Robert Satran			
	Name o	of Person	
Royal Green Appliances	, Inc.		
	Firm/Co	ompany	<del></del>
228 East Post Road			
	Ado	dress	
White Plains, N.Y., 1060	01		
<u> </u>	City/State	and Zip code	
rob@royalgreenny.com			
	E-mail address: (to be used	d for future annual report r	otification)
For further information	n concerning this matter, please	e call:	
Robert Satran	at (	410-1250	
Name of Person		ode Daytime Telep	hone Number
Registration Section of Control The Centre of 2415 N. Monne	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		DDRESS: ection orporations 7 IL 32314
	r the following amount: ble to: FLORIDA DEPARTMEN  \$78.75 Filing Fee & Certificate of Status	NT OF STATE  \$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.

(State or country under the law of which it is incorporated)  (FEI number, if applicable)  (Date of incorporation)  (Date of duration, if other than perpetual)  N/A: business to begin on 11/1/24.  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  228 East Post Road, White Plains, N.Y., 10601  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: REPUBLIC REGISTERED AGENT LLC		-	dopted for the purpose of transacting business in Flo	orida)
(Date of incorporation)  N/A: business to begin on 11/1/24.  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: REPUBLIC REGISTERED AGENT LLC  Tice Address: 1150 Nw 72nd Ave Tower 1 Ste 455	New York	3. <u></u>	3-3794948	<u>_</u>
(Date of incorporation)  N/A: business to begin on 11/1/24.  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  228 East Post Road, White Plains, N.Y., 10601  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: REPUBLIC REGISTERED AGENT LLC  1150 Nw 72nd Ave Tower 1 Ste 455		y under the law of which it is incorporated)	(FEI number, if applicable)	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: REPUBLIC REGISTERED AGENT LLC  Tice Address: 1150 Nw 72nd Ave Tower 1 Ste 455		5		
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Miami , Florida 33126 (City) (Zip code)		1150 Nw 72nd Ave Tower 1 Ste 455	ç <del>-</del> 1	L13
(City) (Zip code)	ffice Address:	Miami	Florida 33126	ı E
$oldsymbol{\omega}$	fice Address:	(City)	(Zip code)	<del></del> 0
	fice Address:	(City)	ar.	
	Registered age	ent's acceptance:		ယ
tving been named as registered agent and to accept service of process for the above stated corporation at the pla signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacit	Registered age	ent's acceptance: ed as registered agent and to accept service		ယ It the pla
Registered agent's acceptance:	Office Address:	•	·;	ယ

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: Robert Satran	□Chairman	Name: Stuart Royal
□Vice Chairman	80 Washington Avenue Address:	TiVice Chairman	Address:
□ Director	S. Lawrence, N.Y., 11559	<b>Director</b>	Scarsdale, N.Y., 10583
□President		<b>■</b> President	
□Vice President		□ Vice President	
□Secretary	□Tieasuer	☐ Secretary	□ Freusurer
■Other CEO	COther	□Other	Other
□Chairman	Name:	□Chairman	Name:
∐Vice Chairman	Address:	LiVice Chairman	Address:
☐Director		□ Director	P
##President		President	
DVice President		DiVice President	
[] Secretary	L) freasurer	☐ Secretary	(7) Freasurer
□Other	COther	ElOther	
□Chairman	Name:	Ti Chairman	Name:
E3Vice Chairman	Address:	□Vice Chairman	
□Director		□Director	
□President		□President	
□Vice President		□ Vice President	
□ Secretary	□Treasurer	□ Secretary	ElTreasurer
□Other	□Other	[]Other	□Other
Important Notice: Undividuals may be	Jse an attachment to report more than six (6). The added to the index when figure your Florida Dep	artment of State Annual Rep	l for reporting purposes only. Non-indexed bott form.
The officer or directshe is aware that fas.817.155, F.S.	tor signing this document (and who is listed in in lise information submitted in a document to the D	umber 11 above) affirms the department of State constitut	it the facts stated herein are true and that he or

### STATE OF NEW YORK

### DEPARTMENT OF STATE

#### Certificate of Status

I, WALTER T. MOSLEY. 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: ROYAL GREEN APPLIANCES, INC.

DOS 1D Number: 1868338

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 11/16/1994

Statement Status: CURRENT Statement Due Date: 11/30/2024

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



WITNESS my hand and official seal of the Department of State, at the City of Albany, on October 25, 2024 at 03:23 P.M.

WALTER T. MOSLEY Secretary of State

Brandon C Hugha

BRENDAN C. HUGHES Executive Deputy Secretary of State

Authentication Number: 100006825021 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>