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٦)	Requestor's Name)	
A)	Address)	
A)	Address)	
(C	City/State/Zip/Phone #)	
(E	Business Entity Name)	
([Document Number)	
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JAN 20 2010



COVER LETTER

TO: **Registration Section Division of Corporations**

Consulting LLC Name of Foreign Limited Liability Company SUBJECT:

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

enniter Luxe Name of Person

Con sulting

4 Main St. Address Peter borough NH 03458 City/State and Zip Code

, luke @ rtconsulting/1c.com

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

For further information concerning this matter, please call:

Jennifer Luke at (603) 98 - 4497 Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

🗙 \$25 Filing Fee

S30 Filing Fee & Certificate of Status

S55 Filing Fee & Certified Copy

□ \$60 Filing Fee, Certificate of Status & Certified Copy

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: <u>RT Consulting LLC</u>
2. Jurisdiction of its organization: <u>Delaware</u>
3. Date authorized to do business in Florida: <u>430107</u>
SECTION II (4-7 complete only the applicable changes)
4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?
5. New name of the limited liability company:(must end with "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")
6. If the amendment changes the period of duration, indicate new period of duration:
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
New Hampshire
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

gnative of a member the authorized representative of a member lealu

Typed or printed name of signed

Filing Fee: \$25.00



New Hampshire as **RT** *Consulting of the Northeast as filed in this office and held in the custody of the Secretary of State.*



In **Testimony** Milliereof, I hereto set my hand and cause to be affixed the Seal of the State, at Concord, this 12th day of January A.D. 2010

Deputy Secretary of State

Filed Date Filed: 02/05/2007 Business /D: 571955 William M. Gardner Secretary of State

STATE OF NEW HAMPSHIRE

Fee for Form SRA:\$ 50.00Filing fee:\$ 50.00Total fees\$ 100.00Use black print or type.

Form No. FLLC 1 RSA 304-C:64 or RSA 304-D:16

APPLICATION FOR REGISTRATION AS A FOREIGH LIMITED LIABILITY COMPANY

TO THE SECRETARY OF STATE OF THE STATE OF NEW HAMPSHIRE

PURSUANT TO THE PROVISIONS OF THE NEW HAMPSHIRE LIMITED LIABILITY COMPANY LAWS, THE UNDERSIGNED HEREBY APPLIES FOR REGISTRATION TO TRANSACT BUSINESS IN NEW HAMPSHIRE, AND FOR THAT PURPOSE SUBMITS THE FOLLOWING STATEMENT:

FIRST: The name of the limited liability company is <u>RT CONSULTING</u>

SECOND: The name which it proposes to register and do business in New Hampshire is <u>AT</u> <u>COMSULTING</u> <u>of</u> <u>the</u> <u>Northpost</u>

THIRD: It is formed under the laws of <u>Delawave</u>

FOURTH: The date of its formation is 1218 2006

FIFTH: The nature of the business or purposes to be conducted or promoted in New Hampshire are <u>Insurance agency / Consulting</u>

	registered agent in New Hampshire is Dkilto	_
B2 Healy	and the complete address (including zip	
code and post office box, if	any) of its registered office in New Hampshire	
is (agent's business address)	P.O. Box 808 . 2-4 Man St	
	Peterborough nH	_
·····	J ' 034 58	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	State of New Hampehire	²
. · · ·	) (TOTO3725058	

FLLC 1 Pg 1 V-1.0

#### APPLICATION FOR REGISTRATION AS A FOREIGN LIMITED LIABILITY COMPANY

Form No. FLLC 1 (Cont.)

#### (limited liability company name)

#### **********************

SEVENTH: (Complete this statement only if a Professional Limited Liability Company.) All the members and managers and those of its officers as required by the laws of (enter the state of formation) and by RSA 304-D:12 are licensed in one or more states, territories of the United States or the District of Columbia to render a professional service described in the statement of purpose of the professional limited liability company.

#### ********************

Dated (IMMUA 201

msuiting limited liability (Exact name of company)

(Signature

(Title)

(Type or print name of person signing)

Complete address of person signing:

119 Bostan	Just Rd	
annerst		
	03031	

MUST BE SIGNED BY A MANAGER OF THE LIMITED LIABILITY COMPANY. IF NO MANAGER, IT MUST BE SIGNED BY A MEMBER. (If the limited liability company is in the hands of a receiver, executor, or other court appointed fiduciary, trustee, or other fiduciary, it must be signed by that fiduciary.)

Mail total fees of \$100.00, DATED AND SIGNED ORIGINAL, CERTIFICATE OF EXISTENCE OR DOCUMENT OF SIMILAR IMPORT ISSUED BY THE STATE OR COUNTRY OF FORMATION AND FORM SRA to: Corporation Division, Department of State, 107 North Main Street, Concord NH 03301-4989.

#### page 2 of 2

3/05



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RT CONSULTING LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTRENTH DAY OF DECEMBER, A.D. 2006.

4269944 8300 061153052



Harriet Smith Windson, Secretary of State AUTHENTICATION: 5288719

DATE: 12-18-06

### STATE of DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE of FORMATION

- Third: (Use this paragraph only if the company is to have a specific effective date of dissolution: "The latest date on which the limited liability company is to dissolve is ______.")
- Fourth: (Insert any other matters the members determine to include herein.)

In Witness Whereof, the undersigned have executed this Certificate of Formation this ______ day of ______ DECEMBER_, 20.06_____.

By: Authorized Person(s)

Name: NANCY J WOLF, CPA Typed or Printed

> State of Delemine Sectoring of State Division of Corporations Calivaria (3:41 M 12/15/2006 FILED 03:41 M 12/15/2006 SEV 061153052 - 4260644 FILE

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Filed Date Filed: 10/29/2009 Business ID: 671965 William M. Gardner Secretary of State

Delaware

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PAGE

1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF "RT CONSULTING LLC", FILED IN THIS OFFICE ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2009, AT 11 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE LIMITED LIABILITY COMPANY HAS FILED ALL DOCUMENTS AND PAID ALL FEES REQUIRED, AND THEREUPON THE LIMITED LIABILITY COMPANY SHALL CEASE TO EXIST AS A LIMITED LIABILITY COMPANY OF THE STATE OF DELAWARE.

4269944 1721C

090783994



CATION: 7549333 AUTHENT

DATE: 09-25-09

State of New Hampshire

State of New Hampshire Certificate of Conversion 2 Page(s)



State of Delaware Secretary of State Division of Corporations Delivered 11:00 AM 08/17/2009 FILED 11:00 AM 08/17/2009 SRV 090783994 - 4269944 FILE

#### STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A DELAWARE LIMITED LIABILITY COMPANY TO A NON-DELAWARE ENTITY PURSUANT TO SECTION 18-216 OF THE LIMITED LIABILITY COMPANY ACT

1.) The name of the Limited Liability Company is RT CONSULTING, LLC

(If changed, the name under which it's certificate of formation was originally filed:

2.) The date of filing of its original certificate of formation with the Secretary of State is 12/15/06

3.) The jurisdiction in which the business form, to which the limited liability company shall be converted, is organized, formed or created is <u>NEW HAMPSHIRE</u>.

4.) The conversion has been approved in accordance with this section;

5.) The limited liability company may be served with process in the State of Delaware in any action, suit or proceeding for enforcement of any obligation of the limited liability company arising while it was a limited liability company of the State of Delaware, and that it irrevocably appoints the Secretary of State as its agent to accept service of process in any such action, suit or proceeding.

6.) The address to which a copy of the process shall be mailed to by the Secretary of State

is 4 MAIN STREET, PO BOX 808 PETERBOROUGH, NH 03458

In Witness Whercof, the undersigned have executed this Certificate of Conversion on this ______ day of <u>Clocust</u>. A.D. <u>2009</u>.

Name: Print or Type

Filed Date Filed: 10/29/2009 Business ID: 571955 William M. Gardner Secretary of State

# State of New Hampshire

 Filing fee:
 \$50.00

 Fee for Form SRA:
 \$50.00

 Total fees
 \$100.00

 Use black print or type.

 Form must be single-sided, on 8½" x 11" paner;

 double sided copies will not be accented.

Form LLC-1 RSA 304-C:12

#### CERTIFICATE OF FORMATION NEW HAMPSHIRE LIMITED LIABILITY COMPANY

THE UNDERSIGNED, UNDER THE NEW HAMPSHIRE LIMITED LIABILITY COMPANY LAWS SUBMITS THE FOLLOWING CERTIFICATE OF FORMATION:

FIRST: The name of the limited liability company is **<u>RT CONSULTING OF THE NORTHEAST, LLC</u>** 

SECOND: The nature of the primary business or purposes are <u>TO PROVIDE CONSULTING</u>, BROKERAGE AND ADMINISTRATION SERVICES FOR EMPLOYEE BENEFITS.

THIRD: The name of the limited liability company's registered agent is PHILIP B. HEALY

and the street address, town/city (including zip code and post office box, if any) of its registered office is (agent's business address) <u>4 MAIN STREET, PETERBOROUGH, NH 03458</u>

FOURTH: The latest date on which the limited liability company is to dissolve is ONGOING

FIFTH: The management of the limited liability company <u>is</u> vested in a manager or managers.

SIXTH: The sale or offer for sale of any ownership interests in this business will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B).

*Signature: PHILIP B. HEALY Print or type name: Manager Title:

The

Date signed:

. .

*Must be signed by a manager; if no manager, must be signed by a member.

DISCLAIMER: All documents filed with available for public inspection in either ta

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Mail fees, <u>DATED AND SIGNED ORIG</u> of State, 107 North Main Street, Concord



State of New Hampshire

Form LLC 1 - Certificate of Formation 2 Page(s)

(Enter "manager" or "member")