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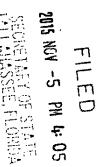
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#### COVER LETTER

TO:

Registration Section
Division of Corporations

• • •

SUBJECT: Rovner \$	Company LLC Name of I	 Limited Liability Co	ompany	<u></u>	
The enclosed "Application by Fore Existence, and check are submitted	rign Limited Liability Comp I to register the above refere	pany for Authorization	on to Trai d liability	nsact Business in Florida," Certificate o company to transact business in Florida	f a
Please return all correspondence co	oncerning this matter to the	following:			
Mare F	Rovner Na	ame of Person			
Roynar	& Company	LLC m/Company			
1499 W	Palmetto Pa	-KR4, S	svite.	408	
Boca R		3486 tate and Zip Code			
mrome	E-mail address: (to be used	d for future annual re	eport noti	fication)	
For further information concerning	this matter, please call:				
Mare Royn Name of	f Contact Person	at (Sel		-6279 Ext 012 time Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		I I C	Division o Registrati Clifton Bi 2661 Exe	ADDRESS: of Corporations on Section ailding cutive Center Circle ee, FL 32301	
Enclosed is a check for the following \$125.00 Filing Fee	ing amount:  \$\Boxed{1} \$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filing		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 22, 2015

MARC ROVNER 1499 W PALMETTO PARK RD, STE 408 BOCA RATON, FL 33486

SUBJECT: ROVNER & COMPANY, LLC

Ref. Number: W15000059072

We have received your document for ROVNER & COMPANY, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 315A00018860

ହିନ୍ତି । ବିଦ୍ୟୁଟର ହିନ୍ଦି । , ନେନ୍ଦି ବି<mark>କ୍ୟାର</mark> । । ବାହର । ଉତ୍ତେଶ ବିହର ହେବା କର୍ଯ୍ୟ ଅନ୍ତେଶ ବିହର ଅନ୍ତେଶ । , । । ଓଡ଼ି କର୍ଯ୍ୟ ବିହର । ଓଡ଼ି ବାହର । । । ଏହି ଅନ୍ତେଶ ବିହର । ବ୍ୟୁ ବିହର ।

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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

TAL CYNADI IANICE WITH SECT	TION 605,0903, FLORIDA STATUTES, TI	SE EOU OWNE IS	CLIDATETED TY DECICTED A	ECDEICNI I D AFTER	2
	SINESS IN THE STATE OF FLORIDA:	IE FOLLOWING IS	SCENITI CELLENGOS	rureign limitel	) LIABILITY
1. Rome- & C	and the state of t	•		•	
, (Name of Forei	ign Limited Liability Company; must in	nclude "Limited Lial	bility Company," "L.L.C.," or	"LLC.")	~
		<del></del>	<del></del>	<del></del>	<b>-</b> ,
(If name unavailable, enter alt Liability Company," "L.L.C,"	ernate name adopted for the purpose of or "LLC.")	f transacting busines	s in Florida. The alternate nam	ne must include "Lir	nited
2 W.J	,	3. <b>20-52</b>	ストフ & .		
(Jurisdiction under the law of company is organized)	of which foreign limited liability	3. <u>40-22</u>	(FEI number, if applicable)	<del></del>	
				}	
4. 9-6-15	(Date first transacted business i (See sections 605.0904 & 605.090	in Florida, if prior to	registration.)	- 1	<b>7</b> .
11100 111	(				
5. <u>1999 W</u>	Palmetto tak 1	<u> 24 , Su.4</u>	e 408	-	
Boca Re	In FL 33486 (Street Address of Prin		······································	_	~ Cor 💆
	(Street Address of Prin	icipal Office)		, ,	
6. <u>Same</u>				- ,	
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	(Mailing Add	iress)		$-\beta = 1$	、图字 圣
7. Name and street address	s of Florida registered agent: (P.O.	Box NOT accept	able)	,	- 355 F
Name:	Marc Romm		_	•	智能
Office Address:	HEHI Adams A	we.			T.
Office Address:	Alle 172 and		22.11.		
	Miami Beach (City)		, Florida 33148 (Zin code)	_	
Registered agent's accept	ance:		(		
	gistered agent and to accept service ion, I hereby accept the appointme				
to complywith the provisio	ons of all statutes relative to the pro				
accept the obligations of n	ny position as registered agent.				
	rek			•	
	, ,	d agent's signature)			
	city and address of the person(s) wh		rity to manage is/are:		
Marz Rov	nu - 4541 Ada	ions the		<del></del>	
President	Miami Be	each FZ	33140		
					1 4
9. Attached is a certificate invisdiction under the law of	of existence, no more than 90 days of which it is organized. (If the certi	old, duly authentic	cated by the official having an language, a translation of	custody of records	s in ine ider oath
of the translator must be su	ibmitted)	. 1 1	•		
	10 K tres.	an authorized perso		_	
	Signature of	an authorized perso	n	-	
This document is executed	l in accordance with section 605.020	03 (1) (b), Florida	Statutes. I am aware that any	y e information	1
submitted in a document to	the Department of State constitutes	s a third degree fel	ony as provided for in s.817	. 1 <sub>7</sub>	

Typed or printed name of signee

## State of New York **Department of State**

I hereby certify, that BLUE SKY COVERAGE, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/20/2006, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment BLUE SKY COVERAGE, LLC, changing its name to ROVNER & COMPANY, LLC , was filed 01/13/2009.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 13th day of October two thousand and fifteen.

Continy Sicidina

Executive Deputy Secretary of State