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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 04 2016

S. YOUNG

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: R PLUS AMERICA, LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

CARMEN MAUERER

\_\_\_\_\_  
Name of Person

R PLUS AMERICA, LLC

\_\_\_\_\_  
Firm/Company

380 PARK PLACE BLVD # 250

\_\_\_\_\_  
Address

CLEARWATER, FL 33759

\_\_\_\_\_  
City/State and Zip Code

finance@teamworkretail.com

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

FILED  
16 JAN -5 PM 5:12  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

For further information concerning this matter, please call:

CARMEN MAUERER

727 674-3500  
at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

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

Enclosed is a check for the following amount:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy | <input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate<br>of Status & Certified Copy |
|--|---|--|--|

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. R PLUS AMERICA, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE 3. 32-0480645  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 380 PARK PLACE BLVD # 250  
CLEARWATER, FL 33759  
(Street Address of Principal Office)

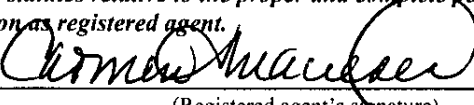
6. 380 PARK PLACE BLVD # 250  
CLEARWATER, FL 33759  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: CARMEN MAUERER  
Office Address: 380 PARK PLACE BLVD # 250  
CLEARWATER, Florida 33759  
(City) (Zip code)

FILED  
16 JAN -5 PM 5:12  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

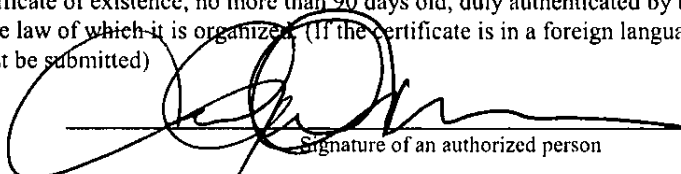
**Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated limited liability company 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.*

  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  
MICHAEL MAUERER - MANAGER - 380 PARK PLACE BLVD # 250, CLEARWATER, FL 33759

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

  
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

MICHAEL MAUERER  
Typed or printed name of signee

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# Delaware

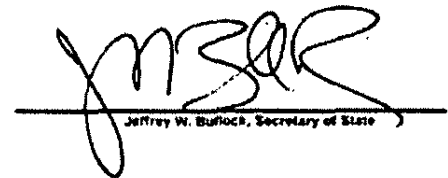
The First State

Page 1

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 FORMATION OF 'R PLUS AMERICA, LLC',  
FILED IN THIS OFFICE ON THE EIGHTH DAY OF DECEMBER, A.D. 2015,  
AT 7:11 O'CLOCK P.M.

FILED  
16 JAN -5 PM 5:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



  
Jeffrey W. Bullock, Secretary of State

5902875 8100  
SR# 20151256079

Authentication: 10576252  
Date: 12-09-15

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

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 07:11 PM 12/08/2015  
FILED 07:11 PM 12/08/2015  
SR 20151256079 - File Number 5902875

**First:** The name of the limited liability company is R Plus America, LLC

**Second:** The address of its registered office in the State of Delaware is 1209

Orange Street in the City of Wilmington

Zip code 19801. The name of its Registered agent at such address is  
The Corporation Trust Company

**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

8 day of December, 2015.

By: /s/ Michael Maurer

Authorized Person (s)

Name: Michael Maurer

FILED  
16 JAN -5 PM 5:12  
SECRETARY OF STATE  
DELAWARE, FLORIDA

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

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 07:11 PM 12/08/2015  
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Authorized Person(s)

Name: Michael Maurer

FILED  
16 JAN 9 PM 5:12  
SECRETARY OF STATE  
TALLAHASSEE, FL