M1600008619

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	·
Special Instructions to Filing Officer:	
W16-69139	

Office Use Only



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10/04/16--01032--004 **130.00

FILED 2016 OCT 27 P 2: 57 SFCRETARY OF STATE

> D. BRUCE 0CT 28 2016



October 7, 2016

STEPHEN ELDER 16192 COASTAL HWY LEWES, DE 19958

SUBJECT: ROCKER LLC Ref. Number: W16000069139

We have received your document for ROCKER LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is 167064.

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

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

Deborah Bruce Regulatory Specialist II

Letter Number: 816A00021697

COVER LETTER

Registration Section
Division of Corporations

TO:

Roc SUBJECT:	ker LLC								
SODSECT:	Name of Limited Liability Company								
		eign Limited Liability Comp I to register the above refere							
Please return all correspondence concerning this matter to the following:									
	Stephen Elder								
Name of Person									
	Rocker LLC								
Firm/Company									
	16192 Coastal F	Iighway							
Address									
	Lewes DE 1995	8							
City/State and Zip Code									
1	rockerpaddleboar	d@gmail.com				SE VE	201		
For further inform	nation concerning	E-mail address: (to be used this matter, please call:	for future annua	l report notifi	ication)	CRETAR	§ 0CT 27	FILE	
Stephen	Elder		904 at (6351020		Y OF S	ת ר	E	
	Name of	Contact Person	Area Code	Dayti	me Telephone		_	0	
Divisior Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section x 6327 see, FL 32314			Division of Registration Clifton Bui 2661 Execu	ADDRESS: Corporations n Section	ircle	57		
	ck for the followi .00 Filing Fee	ng amount: ■ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	-	□ \$160.00 Fil of Status & Ce			cate	



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. Rocker LLC				
(Name of Fore	eign Limited Liability Company; must include	"Limited Liability Company," "L.L.	.C.," or "LLC.")	
1- ROCKEY	SUP LLC			 _
(It name unavailable, enter all Liability Company," "L.L.C."	Iternate name adopted for the purpose of transa " or "LLC.")	eting business in Florida. The altern	iate name must inclu	ide "Limited
2. Delaware	3. 47	7-4369298		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if app	licable)	
4				
	(Date first transacted business in Flori (See sections 605.0904 & 605.0905, F.S	da, if prior to registration.) . to determine penalty liability)		
5. 11232-4 Saint Johns In	ndustrial Parkway North			
Jacksonville FL 32246			7. 	
	(Street Address of Principal C	Office)		
6. 16192 Coastal Highway	у		2016 OCT	וד
Lewes DE 19958			TARY ASSE	FILE
	(Mailing Address)		^{س س}	П
7. Name and street address	ss of Florida registered agent: (P.O. Box]	NOT acceptable)		
Name:	David Erwin		2: 5: STATE ORID	
Office Address:	13273 Mendenhall Place		P J	
	Jackosnville	, Florida ³²²²⁴		
	(City)	(Zip co	ode)	
designated in this applica to complywith the provisi	gistered agent and to accept service of protion, I hereby accept the appointment as ons of all statutes relative to the proper as my position as registered agent.	registered agent and agree to ac nd complete performance of my	et in this capacity.	I further agree
	(Registered agent	's signature)		
8. The name, title or capa	acity and address of the person(s) who has	have authority to manage is/are:		
Stephen Elder, Owner, 16	192 Coastal Highway Lewes DE 19958			
David Erwin, Owner, 161	92 Coastal Highway Lewes DE 19958			
	of existence, no more than 90 days old, do of which it is organized. (If the certificate ubmitted)	is in a foreign language, a transla		
This document is executed submitted in a document to	d in accordance with section 605.0203 (1) (of the Department of State constitutes a third	(b), Florida Statutes. I am aware t d degree felony as provided for it	that any false information s.817.155, F.S.	mation

Typed or printed name of signee

Stephen Elder

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ROCKER 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 SEVENTH DAY OF JULY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROCKER LLC" WAS FORMED ON THE NINTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 202619428

Date: 07-07-16