14000005043

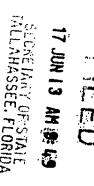
(Re	questor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cid	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies Certificates of Status _		s of Status
Special Instructions to	Filing Officer:	
		1

Office Use Only



500300275235

06/13/17--01020--005 **125.00



JUN 1 4 2017 Y SULKER



June 12, 2017

UPS OVERNIGHT DELIVERY

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

Re: Application by Foreign Corporation for Authorization to Transact Business in Florida (SRBF, L.L.C.)

To Whom It May Concern:

Enclosed is a completed Application by Foreign Corporation for Authorization to Transact Business in Florida (SRBF, L.L.C.), Certificate of Fact from the Commonwealth of Virginia, State Corporation Commission and a filing fee check in the amount of \$125.00.

We would appreciate you processing this request as soon as possible. If you have any questions, please contact me immediately by phone at (804) 320-7101, Ext. 273 or email jbelote@gscapts.com.

Sincerely,

Jenny Belote

Senior Executive Assistant

Enclosures

COVER LETTER

	ion of Corporation	S				
UBJECT:	RBF, L.L.C.					
	······································	Name of	Limited Liability	Company		-
		eign Limited Liability Com I to register the above refer				
ease return al	Il correspondence co	oncerning this matter to the	following:			
	Bonnie L. Wood	i ·				
		N	ame of Person			•
	General Service	s Corporation				
		F	irm/Company			-
	2922 Hathaway	Road, P.O. Box 8984				
			Address			•
	Richmond, VA	23225				
		City/S	tate and Zip Code			-
	jbelote@gscapts.c	om				
		E-mail address: (to be used	for future annual	l report not	ification)	-
or further info	rmation concerning	this matter, please call:				
Jenny	Belote		804 at (01, Ext 273	
	Name of	Contact Person	Area Code		time Telephone Number	
Division Regist P.O. B	LING ADDRESS: on of Corporations ration Section Sox 6327 massee, FL 32314			Division Registrati Clifton B 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
	heck for the followit 25,00 Filing Fee	ng amount: □ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ıg Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop	

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES: THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

			Limited Liability Company," "L.L.C.," or	
(If name unavailable, enter all Liability Company," "L.L.C,		a purpose of transac	ting business in Florida. The alternate nar	ne must include "Limited
2. Commonwealth of Virg	inia-	-1	t Yet Available	·
(Jurisdiction under the law company is organized)	of which foreign limited lia	oility	(FEI number,: if applicable)	
4. Entity has not transact	ed any business prior to r	gistration		
	(Date first transactor) (See sections 605,090)	d business in Florid 4 & 605.0905, P.S.	a, if prior to registration.) to determine penalty liability)	_
5. 2922 Hathaway Road	· · · · · · · · · · · · · · · · · · ·	,		-
Richmond, VA 23225				
11-11-11-11-11-11-11-11-11-11-11-11-11-	(Street Add	hess of Principal Of	Tice)	-
6. P.O. Box 8984				-
Richmond, VA 23225				
	(1	Mailing Address)		- - -
7. Name and street address	ss of Florida registered ag	ent: (P.O. Box N	OT acceptable)	
Name:	C.T Corporation System	1		HAT SE
Office Address:	1200 South Pine Island	Road		SSE SSE
	Plantation	***************************************	, Florida 33324	
		City)	(Zin code)	TO ME A
Registered agent's accen		**	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
designated in this applica-	tance: gistered agent and to ucc tion, I hereby accept the ons of all statutes relative	ept service of pro appointment as re to the proper an	cess for the above stated limited liabi egistered agent and agree to act in thi d complete performance of my duties Peter Trawinski Assistant Secretary	s capacity. I further agree
Having been named as re designated in this applica- to complywith the provision	tance: gistered agent and to ucc tion, I hereby accept the ons of all statutes relative	ept service of pro appointment as re to the proper an	rgistered agent und agree to act in this I complete performance of my duties Peter Trawinski Assistant Secretary	s capacity. I further agree
Having been named as redesignated in this applicate to complywith the provision accept the obligations of th	tance: gistered agent and to ucc tion, I hereby accept the ons of all statutes relative my position as registered	apt service of pro appointment as re to the proper and agent (Registered agent's	rgistered agent und agree to act in this I complete performance of my duties Peter Trawinski Assistant Secretary	s capacity. I further agree
Having been named as redesignated in this applicate to complywith the provision accept the obligations of th	tance: gistered agent and to ucc tion, I hereby accept the ons of all statutes relative my position as registered acity and address of the po	apt service of pro appointment as re to the proper and agent (Registered agent's	rgistered agent and agree to act in this I complete performance of my duties. Peter Trawinski Assistant Secretary signature) ave authority to manage is/are:	s capacity. I further agree
Having been named as redesignated in this applicate to complywith the provision accept the obligations of the name, title or cape	tance: gistered agent and to ucc tion, I hereby accept the ons of all statutes relative my position as registered acity and address of the pe athaway Road, Richmond	ept service of pro appointment as re- to the proper and agent (Registered agent's erson(s) who has/h	egistered agent und agree to act in this d complete performance of my duties Peter Trawinski Assistant Secretary	s capacity. I further agree
Having been named as redesignated in this applicate to complywith the provision accept the obligations of the same, title or cape Jonathan S. Perel, 2922 H	tance: gistered agent and to ucc tion, I hereby accept the ons of all statutes relative my position as registered acity and address of the pe athaway Road, Richmond	ept service of pro appointment as re- to the proper and agent (Registered agent's erson(s) who has/h	rgistered agent and agree to act in this I complete performance of my duties. Peter Trawinski Assistant Secretary signature) ave authority to manage is/are:	s capacity. I further agree
Having been named as redesignated in this applicate to complywith the provision accept the obligations of the accept the obligations of the name, title or cape Jonathan S. Perel, 2922 H. Bonnie L. Wood, 2922 H. P. Attached is a certificate	tance: gistered agent and to ucc tion, I hereby accept the ons of all statutes relative my position as registered acity and address of the pe athaway Road, Richmond athaway Road, Richmond of existence, no more tha of which it is organized(abmitted)	ept service of proappointment as reto the proper and agent (Registered agent's erson(s) who has/h 1, VA 23225 () 1, VA 23225 () 1, VA 23225 () 1, VA 23225 ()	rgistered agent and agree to act in this I complete performance of my duties. Peter Trawinski Assistant Secretary signature) ave authority to manage is/are:	is capacity. I further agree, and I am familiar with and

Typed or printed name of signee

Bonnie L. Wood

Commonbrealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That SRBF, L.L.C. is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is June 8, 2017; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: June 8, 2017

Joel H. Peck, Clerk of the Commission