

118000004846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

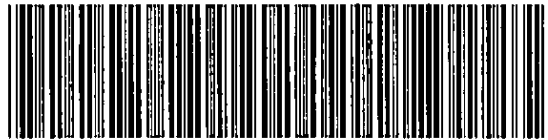
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K SALLY

MAY 21 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Annmarie Ruta Interiors, 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:

Sean McAlister

Name of Person

Veil Corporate

Firm/Company

10421 South Jordan Gateway Suite 600

Address

South Jordan, Utah 84095

City/State and Zip Code

renewals@veil.com

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

For further information concerning this matter, please call:

Sean McAlister

877

313- 1043

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:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
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. Annmarie Ruta Interiors, 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. Utah NEW YORK 3. 81-3238231
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)

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

5. _____
10421 South Jordan Gateway Suite 600, South Jordan, Utah 84095
(Street Address of Principal Office)

6. 14 Persimmon Lane, Staten Island, NY 10314

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NORTHWEST REGISTERED AGENT LLC
Office Address: 3030 N. Rocky Point Drive, STE 150A
TAMPA, Florida 33607
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Tom Glover Tom Glover/Secretary/Northwest Registered Agent LLC
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Annmarie Ruta - Manager

14 Persimmon Lane, Staten Island, NY 10314

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)

Annmarie Ruta
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.

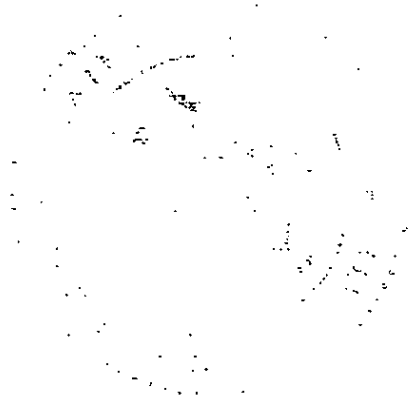
Annmarie Ruta

Typed or printed name of signee

FILED
18 MAY 18 PM 1:29
SECRETARY OF STATE
CORPORATE SERVICES DIVISION

State of New York
Department of State } ss:

I hereby certify, that ANNMARIE RUTA INTERIORS, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/13/2016, and that the Limited Liability Company is existing so far as shown by the records of the Department.



FILED
18 MAY 18 PM 1:29
SECRETARY OF STATE
COLUMBIA UNIVERSITY

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 04th day of May two
thousand and eighteen.*

*Brendan W. Fitzgerald
Executive Deputy Secretary of State*



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2017

SEAN MCALISTER
VEIL CORPORATE
10421 SOUTH JORDAN GATEWAY, STE. 600
SOUTH JORDAN, UT 84095

SUBJECT: ANNMARIE RUTA INTERIORS, LLC
Ref. Number: W17000075783

We have received your document for ANNMARIE RUTA INTERIORS, LLC and your check(s) totaling \$375.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 817A00019198