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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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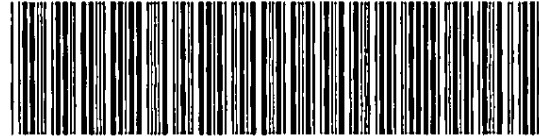
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEC 21 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Rosewell Management, 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:

Vivian Rose
Name of Person

Firm/Company

12215 Kenton Way
Address

Boca Raton, Florida 33428
City/State and Zip Code

vprose47@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ethan Marsh at (800) 375-2453
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 checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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. Rosewell Management, 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. Alaska 3. _____
(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. 505 Old Steese Hwy Ste 122 6. 12215 Kenton Way
(Street Address of Principal Office) (Mailing Address)
Fairbanks, AK 99701 Boca Raton, Florida 33428

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

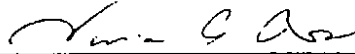
Name: Vivian Rose

Office Address: 12215 Kenton Way

Boca Raton, Florida 33428
(City) (Zip code)

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:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Member</u>	<u>Vivian Rose</u> <u>12215 Kenton Way</u> <u>Boca Raton, Florida 33428</u>	<u>Member</u>	<u>Gregory Rose</u> <u>12215 Kenton Way</u> <u>Boca Raton, Florida 33428</u>
<u>Member</u>	<u>Mark Rose</u> <u>12215 Kenton Way</u> <u>Boca Raton, Florida 33428</u>	<u>Member</u>	<u>Tristan Rose</u> <u>12215 Kenton Way</u> <u>Boca Raton, Florida 33428</u>

(Use attachments if necessary)

SEE ATTACHED

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)

10. 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.

Vivian Rose

Typed or printed name of signer

Continued

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

Member	Christopher Rose 12215 Kenton Way Boca Raton, Florida 33428
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Member	Catherine Rose 12215 Kenton Way Boca Raton, Florida 33428
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Member	Joni Rose 12215 Kenton Way Boca Raton, Florida 33428
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Alaska Entity #10070196

State of Alaska
Department of Commerce, Community, and Economic
Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

Rosewell Management, LLC

This entity was formed on October 19, 2017 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective November 29, 2018.

A handwritten signature in cursive script that reads "Mike Navarre".

Mike Navarre
Commissioner