

M19000002773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

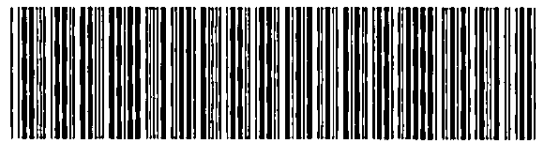
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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2019 MAR - 8 PM 2:40  
TALLAHASSEE FLORIDA

BRUCE  
MAR 25 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RCM Technology Consulting 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:

Rafael Moreira

Name of Person

RCM Technology Consulting LLC

Firm/Company

1235 Bolton Pl

Address

Lake Mary, FL 32746

City/State and Zip Code

rcmtechnologyconsulting@gmail.com

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

For further information concerning this matter, please call:

Rafael Moreira

Name of Contact Person

at ( 801 )

Area Code

657-6923

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

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TALLAHASSEE, FLORIDA  
MAR 8 2019

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FILED

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. RCM Technology Consulting 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. Idaho 3. 82-1177298  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 07/01/2018  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability.)

5. <u>1235 Bolton PI</u> (Street Address of Principal Office)	6. <u>1235 Bolton PI</u> (Mailing Address)
<u>Lake Mary</u>	<u>Lake Mary</u>
<u>32746</u>	<u>32746</u>

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

Name: Registered Agents Inc.  
Office Address: 7901 4th St N STE 300  
St. Petersburg, Florida 33702  
(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.*

Bee Hume  
(Registered agent's signature)

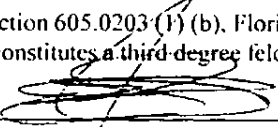
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Member</u>	<u>Rafael Moreira</u> <u>1235 Bolton PI</u> <u>Lake Mary, FL 32746</u>		

(Use attachments if necessary)

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)

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.

  
Signature of an authorized person  
RAFAEL MOREIRA  
Typed or printed name of signee

FILED  
2019 MAR -8 PM 2:40  
CLERK OF COURT  
STATE OF FLORIDA  
TALLAHASSEE



# STATE OF IDAHO

Lawrence Denney | Secretary of State  
**Business Office**  
450 North 4th Street  
PO Box 83720  
Boise, ID 83720

**Rafael Moreira**  
1235 BOLTON PL  
LAKE MARY, FL 32746

March 4, 2019

**Request Type: Certificate of Existence/Filing**

Request #: 0003441209  
Receipt #: 000160857

Issuance Date: 03/04/2019  
Copies Requested: 0

**Regarding: RCM TECHNOLOGY CONSULTING, LLC**

Filing Type: Limited Liability Company (D)

File #: 549293

Formation/Qualification Date: 04/12/2017

Status: Active-Existing

Formation Locale: IDAHO

Duration Term: Perpetual

Inactive Date:

## Certificate of Existence

I, Lawrence Denney, Secretary of State of the State of Idaho, do hereby certify that effective as of the issuance date noted above

**RCM TECHNOLOGY CONSULTING, LLC**

is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above.

A handwritten signature in black ink, appearing to read "Lawrence Denney".

Lawrence Denney  
Secretary of State

Processed By: Business Division

Verification #: 001213012