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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** R. Richbell Holdings 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:

Michael Devine

\_\_\_\_\_  
Name of Person

Michael Devine

\_\_\_\_\_  
Firm/Company

340 Fifth Avenue

\_\_\_\_\_  
Address

Pelham, NY 10803

\_\_\_\_\_  
City/State and Zip Code

mikedevineoffice@gmail.com

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

For further information concerning this matter, please call:

Michael Devine

914

738-7900

at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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. R. Richbell Holdings 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. New York  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 85-4063932  
(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. 340 5th Avenue  
(Street Address of Principal Office)

6. 2525 25th Place North  
(Mailing Address)

Pelham, New York, 10803  
Loxahatchee, FL 33470

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

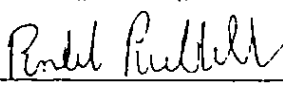
Name: Ronald Richbell, II

Office Address: 3207 Mandarin Boulevard

Loxahatchee, Florida 33470  
(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. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

| <u>Title or Capacity:</u>                   | <u>Name and Address:</u>                | <u>Title or Capacity:</u>            | <u>Name and Address:</u>             |
|---|---|--------------------------------------|--------------------------------------|
| <input checked="" type="checkbox"/> Manager | Name: <u>Ronald Richbell, II</u>        | <input type="checkbox"/> Manager     | Name: _____                          |
| <input type="checkbox"/> Member             | Address: <u>3207 Mandarin Boulevard</u> | <input type="checkbox"/> Member      | Address: _____                       |
| <input type="checkbox"/> Authorized         | <u>Loxahatchee, FL 33470</u>            | <input type="checkbox"/> Authorized  | _____                                |
| Person                                      | _____                                   | Person                               | _____                                |
| <input type="checkbox"/> Other _____        | <input type="checkbox"/> Other _____    | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Manager            | Name: <u>restated</u>                   | <input type="checkbox"/> Manager     | Name: _____                          |
| <input checked="" type="checkbox"/> Member  | Address: <u>3207 Mandarin Boulevard</u> | <input type="checkbox"/> Member      | Address: _____                       |
| <input type="checkbox"/> Authorized         | <u>Loxahatchee, FL 33470</u>            | <input type="checkbox"/> Authorized  | _____                                |
| Person                                      | _____                                   | Person                               | _____                                |
| <input type="checkbox"/> Other _____        | <input type="checkbox"/> Other _____    | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Manager            | Name: <u>Ronald Richbell, III</u>       | <input type="checkbox"/> Manager     | Name: _____                          |
| <input checked="" type="checkbox"/> Member  | Address: <u>194 Points Way</u>          | <input type="checkbox"/> Member      | Address: _____                       |
| <input type="checkbox"/> Authorized         | <u>Tallahassee, FL 32305</u>            | <input type="checkbox"/> Authorized  | _____                                |
| Person                                      | _____                                   | Person                               | _____                                |
| <input type="checkbox"/> Other _____        | <input type="checkbox"/> Other _____    | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

Ronald Richbell, II  
Signature of an authorized person

Ronald Richbell, II

Typed or printed name of signee

**State of New York**  
**Department of State** } ss:

I hereby certify, that R. RICHBELL HOLDINGS LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 11/19/2020, and that the Limited Liability Company is existing so far as shown by the records of the Department.



2021. 10. 27. 10

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*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 26th day of January two  
thousand and twenty-one.*

*Brendan C Hughes*

*Brendan C Hughes  
Executive Deputy Secretary of State*