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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

.\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

# Foreign Limited Liability Company ROCK STEADY REAL ESTATE, LLC

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\$125.00

Electronic Filing Menu Corporate Filing Menu

Help

From: Kimberly Laughrey

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

	AL ESTATE, LLC			
(Name of Fores	in Limited Hability Company, must include "Limited	Liability Company," "LLC."	" or "ELC.")	
e waveilable, coror afterni	to same adopted for the purpose of menuecting business in Flo	ids. The alternate name must with	ude "Limited Liability Company."	"LLC," or "LLC "
ASSACHUSETTS		45-1538806		
	which foreign limited liability company is organized)	3	(FEI number, if applicable)	
	•			
	Oute first transacted fustaces in Florida, if prins to a (See sections 605.5904 & 605.0905, F.S. to determin	gistration.) spensity liability)	<del></del>	
Blueberry Ridge	•		çe	
Address of Principal Office		6, [Mailing Address	(c	
A ¢oreus or Principal Crim	±)			-
Westfield, MA 01085		Westfield, MA 0	1083	
				;
				<del></del>
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and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)		<del></del> .
and street address	s of Florida registered agent: (P.O. Box	NOT_acceptable)		
and street address		NOT acceptable)		
and street addres	s of Florida registered agent: (P.O. Box  C T Corporation System	NOT acceptable)	<u>.</u>	
	C T Corporation System	NOT acceptable)		······································
		NOT acceptable)	· · · · · · · · · · · · · · · · · · ·	······································
Name:	C T Corporation System 1200 South Pine Island Road		33324	 
Name:	C T Corporation System  1200 South Pine Island Road  Plantation			
Name:	C T Corporation System 1200 South Pine Island Road		33324 (Zip tode)	
Name: Office Address:	C T Corporation System  1200 South Pine Island Road  Plantation  (Csy)	, Florida	(Lip sode)	
Name: Office Address: red agent's accep	C T Corporation System  1200 South Pine Island Road  Plantation  (Cay)	Florida	(Lip rode)	onpany at th
Name:  Office Address:  red agent's accepteen named as re	C T Corporation System  1200 South Pine Island Road  Plantation  (Csy)  Stance:  egistered agent and to accept service of p	rocess for the above s	(Expresse)  stated limited liability of agree to act in this ca	
Name:  Office Address:  red agent's accepteen named as reted in this application with the provis	C T Corporation System  1200 South Pine Island Road  Plantation  (Cxy)  Stance: Existered agent and to accept service of parties, I hereby accept the appointment actions of all statutes relative to the proper	rocess for the above s	(Lip code)  stated limited liability of agree to act in this ca	
Name:  Office Address:  red agent's accepteen named as reted in this application with the provis	C T Corporation System  1200 South Pine Island Road  Plantation  (Csy)  Stance:  egistered agent and to accept service of p	rocess for the above s registered agent and and complete perforn	(Lip code)  stated limited liability of agree to act in this ca	

To: 18506176383

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

Tifis or Canacity:	Name and Address:	Title or Capacity:	Name and Address:  Karl Schmidt
Manager	Name: Michael Rockwal	□Manager	Name:
Mcmber	Address: 5 Blueberry Ridge	<b>≣</b> Member	Address: 15441 Old Wedgewood Court
☐ Authorized	Westfield, MA 01085	□ Authorized	Fort Mycrs, Ft. 33908
Person		Person	
DOther		Oither	□Other
<b>П</b> Молодит	Name:	☐Manager	Nome:
☐ Member	Address:	CiMember	Address:
☐ Authorized		□ Authorized	
Person		Person	
ClOther		□Other	Other
☐ Manager	Name:	Manager	Name::
□ Member	Address:	☐ Member	Address:
Authorized		□ Authorized	
Person		Person	
Other		Other	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 outh 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 feloxy as provided for in s.817.155, F.S.

Michael Rockwal

Typed or printed some of stance



# The Commonwealth of Massachusetts Secrétary of the Commonwealth State House, Boston, Massachusetts 02188

William Francis Galvin Secretary of the Commonwealth

#### February 25, 2021

#### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

## ROCK STEADY REAL ESTATE, LLC.

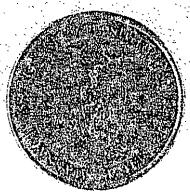
in accordance with the provisions of Massachusetts General Laws Chapter 156C on February 28, 2011.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: NONE

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: MICHAEL ROCKWAL, KARL SCHMIDT

The names of all persons authorized to act with respect to real property listed in the most recent filing are: MICHAEL ROCKWAL, KARL SCHMIDT



Processed By:NGM

In testimony of which, I have hereunto affixed the

Great Seal of the Commonwealth on the date first above written.

Secretary of the Commonwealth

William Travino Galein