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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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21 Mar 29 AM 10:31
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JANUARY 12 2021



SULLIVAN MOUNTJOY
ATTORNEYS.

Suzanne Jagoe
Paralegal
sjagoe@smlegal.com

Skill. Integrity. Efficiency.

March 26, 2021

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

Re: RGAA Rentals, LLC
Application by Foreign Limited Liability Company for Authorization to Conduct
Business in Florida

Dear Registration Section:

Our office represents John A. Ray, the sole member of RGAA Rentals, LLC, a Kentucky limited liability company (the "LLC"). Mr. Ray is purchasing real property in Florida and needs to qualify the LLC to transact business in Florida. Enclosed are the following:

- Form Cover Letter included with your Instructions
- Check payable to Florida Department of State in the amount of \$160.00
- Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
- Order Confirmation from InCorp as the Registered Agent for RGAA Rentals, LLC
- Certificate of Existence from the Kentucky Secretary of State dated March 18, 2021

Please contact me if you require anything further with respect to the Application. We very much appreciate your assistance with this matter.

Sincerely,

Suzanne Jagoe

cc: John A. Ray
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RGAA RENTALS, 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:

Suzanne Jagoe
Name of Person

Sullivan Mountjoy, PSC
Firm/Company

100 Saint Ann Street
Address

Owensboro, Kentucky 42303
City/State and Zip Code

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

For further information concerning this matter, please call:

Suzanne Jagoe at (270) 926-4000
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 & ☐ \$155.00 Filing Fee & ☒ \$160.00 Filing Fee, Certificate
Certificate of Status Certified Copy 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. RGAA RENTALS, 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. KY 3. 86-2465147
(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. 3038 Oak Knoll Cove 6. 3038 Oak Knoll Cove
(Street Address of Principal Office) (Mailing Address)
Owensboro, Kentucky 42303 Owensboro, Kentucky 42303

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

Name: InCorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee 33470
(City) Florida (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.

See Attachment from In Corp
(Registered agent's signature)

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21 MAR 24 AM 10:31
CLERK OF CIRCUIT COURT
IN FLORIDA
JANICE L. BROWN, CLERK

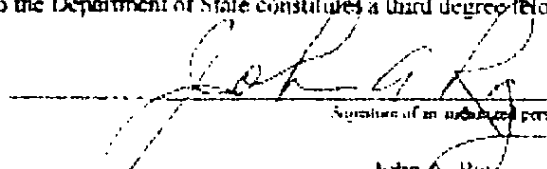
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: John A. Ray	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: 3038 Oak Knoll Cove	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Owensboro KY 42303	<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: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<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: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<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.



Signature of an authorized person
John A. Ray

Secretary of the Corporation

From: orderstatus@incorp.com
To: [Suzanne Jagoe](#)
Subject: [InCorp Services, Inc.]: Order Confirmation
Date: Wednesday, March 24, 2021 4:40:46 PM

InCorp



Order Confirmation

Registered Agent Service Order

IMPORTANT: When you receive your articles back from Florida, remember that you need to immediately report to us the incorporation/filing date as well as the ID number that Florida assigned to your entity. Additionally, for statutory compliance, you need to mail, fax, email or upload into our system copies of your filed articles, bylaws, operating agreements or other documents.

Order Information

Order Date/Time:	3/24/2021 2:40:16 PM
Order ID:	2646757
Account ID:	467578
Entity ID:	860629

Account Information

Name:	Jagoe, Suzanne A
Email:	sjagoe@smlegal.com
Phone:	270-926-4000
Billing Address:	100 Saint Ann Street Owensboro, KY 42303 United States

Entity Information

New or Existing Entity:	New
Entity Name:	RGAA Rentals, LLC
Entity Type:	Foreign Limited-Liability Company
Filing Jurisdiction:	Florida
Domestic Jurisdiction:	Kentucky
Fiscal Year End:	December 31

Agent Information

Address:	InCorp Services, Inc. 17888 67th Court North Loxahatchee, FL 33470
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Note: Any documents filed listing InCorp Services, Inc. as the registered agent must have agent name stated as InCorp Services, Inc. with all punctuation (excluding quotation marks). If client prepares and files any document with agent name in any other form, InCorp can not guarantee that services can or will be performed and client will be solely responsible for any fees associated with amending the filing to the correct

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Certificate of Existence

Authentication number: 243929

Visit <https://web.sos.ky.gov/ftshow/certvalidate.aspx> to authenticate this certificate.

I, Michael G. Adams, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

RGAA Rentals, LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is March 8, 2021, and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 18th day of March, 2021, in the 229th year of the Commonwealth.



Michael G. Adams

Michael G. Adams
Secretary of State
Commonwealth of Kentucky
243929/1137547