

M21000012976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

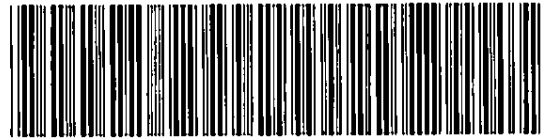
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED

2021 OCT -1 AM 11:45

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

2021 OCT -1 AM 8:33

FILE 2ND

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 044050 8026032

AUTHORIZATION :



COST LIMIT : \$160.00

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ORDER DATE : September 28, 2021

ORDER TIME : 8:56 AM

ORDER NO. : 044050-025

CUSTOMER NO: 8026032  
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FOREIGN FILINGS

NAME: ROCHESTER & ASSOCIATES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

       PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER: \_\_\_\_\_

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Rochester & Associates, 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:

Lee A. Patterson, III

Name of Person

Morningstar Law Group

Firm/Company

421 Fayetteville Street, Suite 530

Address

Raleigh, NC 27601

City/State and Zip Code

dkrochester@rochester-assoc.com

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

For further information concerning this matter, please call:

Lee A. Patterson, III

919

590-0401

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. Rochester & Associates, 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. Georgia 58-1148966  
(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. 425 Oak Street NW  
(Street Address of Principal Office)  
Gainesville, GA 30501

6. 425 Oak Street NW  
(Mailing Address)  
Gainesville, GA 30501

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee 32301  
(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.

Alexis Weiland, Alexis Weiland, Assistant  
(Registered agent's signature) Vice President

2021 OCT -1 11 8:33

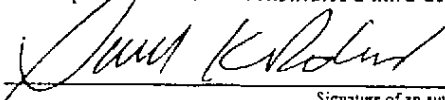
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<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: Darrell K. Rochester	<input checked="" type="checkbox"/> Manager	Name: Elie P. Azar
<input type="checkbox"/> Member	Address: 425 Oak Street NW	<input type="checkbox"/> Member	Address: 601 Brickell Key Drive, Suite 700
<input type="checkbox"/> Authorized	Gainesville, GA 30501	<input type="checkbox"/> Authorized	Miami, FL 33131
Person		Person	
<input checked="" type="checkbox"/> Other President	<input checked="" type="checkbox"/> Other Chief Executive Officer	<input checked="" type="checkbox"/> Other Vice President	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Manager	Name: James F. Thompson	<input checked="" type="checkbox"/> Manager	Name: Blake Conner
<input type="checkbox"/> Member	Address: 5556 Doliver Drive	<input type="checkbox"/> Member	Address: 601 Brickell Key Drive, Suite 700
<input type="checkbox"/> Authorized	Houston, TX 77056	<input type="checkbox"/> Authorized	Miami, FL 33131
Person		Person	
<input checked="" type="checkbox"/> Other Vice President	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other Secretary	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Manager	Name: Corry Doyle	<input type="checkbox"/> Manager	Name: Alon Debbi
<input type="checkbox"/> Member	Address: 601 Brickell Key Drive, Suite 700	<input type="checkbox"/> Member	Address: 601 Brickell Key Drive, Suite 700
<input type="checkbox"/> Authorized	Miami, FL 33131	<input type="checkbox"/> Authorized	Miami, FL 33131
Person		Person	
<input checked="" type="checkbox"/> Other Assistant Secretary	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other Treasurer	<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

Rochester & Associates, LLC

Managers and Officers

<u>Name</u>	<u>Address</u>	<u>Title</u>
Jonathan Satter	601 Brickell Key Drive, Suite 700 Miami, FL 33131	Manager
Jack P. Miller	1146 Gardencrest Houston, Texas 7707	Manager
James B. Binkley	9209 Stagecoach Drive Houston, TX 77041	Manager
Brian K. Rochester	425 Oak Street NW Gainesville, GA 30501	Executive Vice President

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**Rochester & Associates, LLC**  
a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 22005062  
Date Inc/Auth/Filed: 11/24/1972  
Jurisdiction : Georgia  
Print Date : 09/30/2021  
Form Number : 211



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State