

M21000015424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

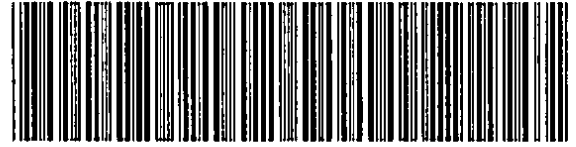
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900376430969

11/12/21--01034--016 **125.00

RECEIVED
NOV 12 AM 11:04
CLERK OF COURT
STATE OF FL

S. HAWKES
NOV 12 2021

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 131 RPD, 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:

Ryan Gadles

Name of Person

131 RPD, LLC

Firm/Company

859 Willard Street, Suite 503

Address

Quincy, MA 02169

City/State and Zip Code

filing@conquestfunds.com ✓

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

For further information concerning this matter, please call:

Ryan Gadles

617

799 4197

Name of Contact Person

at (_____) _____

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. 131 RPD, 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. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 87-1143508
(FEI number, if applicable)

4. 10/27/21
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 859 Willard Street, Suite 503
(Street Address of Principal Office)

6. 859 Willard Street, Suite 503
(Mailing Address)

Quincy, MA 02169
Quincy, MA 02169

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

Name: Registered Agents Inc.

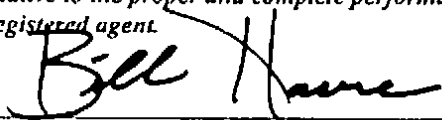
Office Address: 7901 4th Street, Suite 300

St. Petersburg, Florida 33702
(City) (Zip code)

FILED
2021 OCT 12 AM 11:04
CLERK OF STATE
TALLAHASSEE, FL

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)

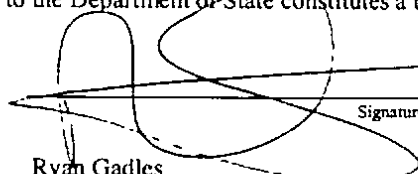
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<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: Ryan Gadles	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: 109 Colonial Drive	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Quincy, MA 02169	<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
Ryan Gadles

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "131 RPD, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE EIGHTH DAY OF JUNE, A.D. 2021, AT 3:27 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

5981816 8315

SR# 20213212348

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204430167

Date: 10-16-21



HARVARD BUSINESS SERVICES, INC.

16192 COASTAL HIGHWAY, LEWES, DELAWARE 19958
Phone: 302-645-7400 Toll Free: 800-345-2677 Fax: 302-645-1280
www.delawareinc.com

October 28, 2021

Mr. Ryan Gadles
131 RPD, LLC
859 Willard Street
Ste 503
Quincy, MA 02169

Dear Mr. Gadles,

We would like to thank you for choosing Harvard Business Services, Inc., and its network of affiliates, to act as your company's Registered Agent in the State of Florida. You are now on record and are free to make the filing at your convenience. The service term is good for one full year from the date of your filing; approximately 60 days prior to the completion of the Florida Registered Agent service we will begin invoicing for the following year.

When completing your filing with the Florida Corporation Division, please input the following information anywhere Registered Agent information is required:

Registered Agents Inc.
7901 4th Street N, Ste 300 St.
Petersburg, FL 33702
Pinellas County

For Online Filings: Registered Agent Signature – Bill Havre, Assistant Secretary

After you have completed your filing, all future correspondence from Florida will be delivered to the address above. Once received, the correspondence will be promptly forwarded to the address on record with Harvard Business Services, Inc. If you need to update the contact information on record with our company, you may download a change of address form at any time from https://www.delawareinc.com/forms/change_of_address.pdf, or you may call for further assistance.

Among the many advantages of choosing HBS is our free lifetime customer service and support. If you have any questions, concerns or need further assistance, not just now but anytime in the future, please feel free to contact our customer service department. Call us toll-free 800-345-2677 and we will be more than happy to assist you. Again, thank you for your patronage. We look forward to serving you.

Sincerely,

RICHARD H. (Rick) BELL
CEO & CHAIRMAN