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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

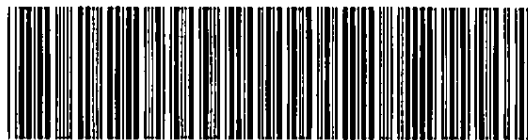
(Business Entity Name)

(Document Number)

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

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06/22/22--01018-012 \*\*125.00

APPROVED  
AND  
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2022 FEB 23 PM 2:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 01 2022  
K. Brumbley

**SIMONE VELASQUEZ HOOVER PA**

P.O. Box 211402

Royal Palm Beach, FL 33421

Tel 561-790-0014

Fax 561-581-4881

E-Mail: [Simone@Hoovercocpa.com](mailto:Simone@Hoovercocpa.com)

February 23, 2022

Florida Department of State

Registration Section

Division of Corporations

PO Box 6327

Tallahassee, FL 32314

RE: Registration of Foreign Corporation Southampton Development Company, LLC

To whom it may concern:

Please find enclosed for your consideration:

Application by Foreign LLC for authorization to transact business in Florida  
Certificate of Good Standing by State of FL issued 2/23/22  
Check in the amount of \$ 125.00

We respectfully request your authorization to do business in the State of Florida.

If you have any questions, please call me at 561-790-0014.

Thank you for your consideration.

**SIMONE VELASQUEZ HOOVER, PA**

Simone Velasquez Hoover, CPA\*/ CVA\*\*

As registered agent for Southampton Development Company, LLC

Encl: 2

DM w/encl

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. Southampton Development Company, 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.")

Rhode Island

87-2828785

2. (Jurisdiction under the law of which foreign limited liability company is organized)

3. (FEI number, if applicable)

6/25/2021

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

10 Dorrance Street, Suite 700

10 Dorrance Street, Suite 700

5. (Street Address of Principal Office)

6. (Mailing Address)

Providence, RI 02903

Providence, RI 02903

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

Name: Simone Velasquez Hoover, CPA

Office Address: 8537 Estate Drive

West Palm Beach, FL

(City)

, Florida

33411

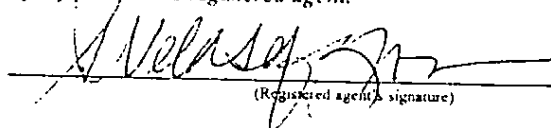
(Zip code)

2022 FEB 23 PM 2:20  
SECRETARY OF STATE  
TALLAHASSEE, FL 09007

APPROVED  
AND  
FILED

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]:

**Title or Capacity:** **Name and Address:**

☒ Manager Name: Dennis W. Michaud  
☐ Member Address: 10 Dorrance St.  
☐ Authorized Suite 700  
Person Providence, RI 02903  
☐ Other ☐ Other

☐ Manager Name: Michael J. Monchick  
☒ Member Address: 1655 Palm Beach Lakes Blvd.  
☐ Authorized #500  
Person West Palm Beach, FL 33401  
☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person \_\_\_\_\_  
☐ Other ☐ Other

**Title or Capacity:** **Name and Address:**

☐ Manager Name: Nancy E. Springett  
☒ Member Address: 10 Dorrance St.  
☒ Authorized Suite 700  
Person Providence, RI 02903  
☐ Other ☐ Other

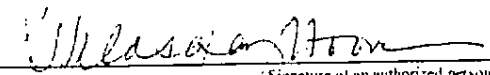
☐ Manager Name: Simone Velasquez Hoover  
☒ Member Address: PO Box 211402  
☒ Authorized \_\_\_\_\_  
Person West Palm Beach, FL 33421  
☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person \_\_\_\_\_  
☐ 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 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  
SIMONE VELASQUEZ HOOVER  
\_\_\_\_\_  
Typed or printed name of signer



*State of Rhode Island*  
*Department of State | Office of the Secretary of State*  
*Nellie M. Gorbea, Secretary of State*

### LONG FORM CERTIFICATE OF GOOD STANDING

I, Nellie M. Gorbea, Secretary of State and custodian of the seal and corporate records of the State of Rhode Island, hereby certify that:

**Southampton Development Company, LLC**

is a Rhode Island Limited Liability Company organized on **June 25, 2021**.

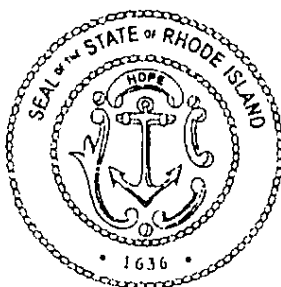
I further certify as of the date of this certificate the attached summary is an accurate description of all known filings made in this office by the above-named entity.

I further certify that revocation proceedings are not pending; articles of dissolution have not been filed; all annual reports are of record and the company is active and in good standing with this office. This certificate is not to be considered as a notice of the company's tax status, financial condition or business practices; such information is not available from this office.

SIGNED and SEALED on

February 23, 2022

Secretary of State





*State of Rhode Island  
Department of State | Office of the Secretary of State  
Nellie M. Gorbea, Secretary of State*

***Long Form Good Standing Summary For***

***Southampton Development Company, LLC***

***IT IS FURTHER CERTIFIED that no amendments have been filed in this office as of this date.***