# M22000015716

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bı	isiness Entity Name	)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	(A)
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S. FRANKLIN OCT 12 2022

### **COVER LETTER**

**Registration Section** 

TO:

Div	ision of Corporations					
SUBJECT:	Ronin POS, LLC					
	Name of Limited Liability Company					
		mpany for Authorization to Transact Business in Florida erenced foreign limited liability company to transact bus				
Please return	all correspondence concerning this matter to the	ne following:				
	Магс Вапту					
		Name of Person	<del>-</del>			
	Ronin POS, LLC					
		Firm/Company	_			
	2200 Ranch Loop Dr					
		Address	<del>-</del>			
	New Braunfels, TX 78132		2022 (, ;			
	City	/State and Zip Code	- '			
	marc@roninpos.com		 			
	E-mail address: (to be us	sed for future annual report notification)	PII.			
For further in	formation concerning this matter, please call:		٠ ٢٠			
Ma	rc Barry	512 801-1852 at ( )	1			
	Name of Contact Person	Area Code Daytime Telephone Number	_			
Reg Div P.C	iling Address: gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Plea	losed is a check for the following amount: use make check payable to: FLORIDA DEPAI 0125.00 Filing Fee \$\Bar{\text{\$\subset}}\$	2 □ \$155.00 Filing Fee & □ \$160.00 Filing Fee				

## 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:

(Name of Foreign	Limited Liability Company, must include "Limited	d Liability Cor	npany,""L.L.C.," or "ELC.")	
name unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	orids. The altern	ate name must include "Limited Liability	Company," "L. L.C." or "
Texas		85-3760470		
(Jurisdiction under the law of which foreign limited liability company is organized				
				2022 DITT
	(Date first transacted business in Florida, if prior to t (See sections 605.0904 & 605.0905, F.S. to determine	registration.) ne penalty liabili	ity)	
2200 Ranch Loop Dr		6	Centerpoint Rd, STE B (Mailing Address)	- P
eet Address of Principal Office)			(Mailing Address)	1
New Braunfels, TX 78	132	San	Marcos, TX 78666	7: 27
Name and street address	s of Florida registered agent: (P.O. Box	NOT accep	otable)	
Name:	Bill Decklever	-	_	
Office Address:	2138 Mcclelian Pkwy		<del></del>	
	Sarasota		34239 , Florida	
	<del></del>			

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: Title or Capacity: Name and Address: Manager ☐Manager Name: Member □Member Address: Authorized ☐ Authorized Person Person Other\_ □Other Other Other □Manager Name: □Manager Name: ☐ Member Address: □Member Address: □ Authorized ☐ Authorized Person Person Other\_ □Other □Other □Other. □Manager Name: □Manager Name: □Member Address: ☐ Member Address: \_\_\_\_\_ ☐ Authorized ☐ Authorized Person Person Other\_ Other\_\_\_ □Other Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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



## Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Ronin POS, LLC (file number 803817327), a Domestic Limited Liability Company (LLC), was filed in this office on November 03, 2020.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 04, 2022.



Phone: (512) 463-5555

Prepared by: SOS-WEB

John B. Scott Secretary of State

Come visit us on the internet at https://www.sos.texas.gov/

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 1183881050003



September 25, 2022

MARC BARRY 2200 RANCH LOOP DR NEW BRAUNFELS, TX 78132 US

SUBJECT: RONIN POS, LLC Ref. Number: W22000121850

We have received your document for RONIN POS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 722A00021351

RECEIVED OCT 1 1 2022