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COVER LETTER

TO: Registration Section Division of Corporations

SAUL'S ROOF SYSTEMS LLC

SUBJECT: __

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:

SAUL PENA Name of Person . SAUL'S ROOF SYSTEMS LLC Firm/Company 11922 E 37TH PL Address TULSA - OK - 74146 City/State and Zip Code saulsroofsystems@outlook.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: SAUL PENA 918 852-0498 ___) __ _ at (_____ Name of Contact Person Area Code Daytime Telephone Number Mailing Address: Street Address: **Registration Section Registration Section Division of Corporations Division of Corporations**

Division of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check paya	ble to: FLORIDA DEPARTMI	ENT OF STATE	
S125.00 Filing Fee	🗍 \$130.00 Filing Fee & 🗌 🗌	3155.00 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:

, SAUL'S ROOF SYSTEMS LLC

f name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida. The altern	nate name must include "Limited Liabi	luy Company," "I	1C," or "	LLC."	
OKLAHOMA			-1418166				
(Jurisdiction under the law of w	lurisdiction under the law of which foreign limited liability company is organized)		(FEI number,	(FEI number, it applicable)			
01-23-2023							
	(Date first transacted business in Florida, if prior to r (See sections (105,0904 & 605.0905, F.S. to determin	egistration) repenalty liabi		_			
2326 S GARNETT RE		6.	922 E 37TH PL				
treet Address of Principal Office)		0	(Mailing Address)			-	
TULSA OK 74129		TL	ILSA OK 74146				
					2023 FE		
Name and street addres	<u>s</u> of Florida registered agent: (P.O. Box	<u>NOT</u> aceo	:ptable)	1 5 5	B	•	
					P		
Name:	Saul Pena			•	2: 0		
Office Address:	13220 Panama City Beach Pkwy						
Office / Ridress.							

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.

100 (Registered agent's signature)

Title or Capacity:	Name and Address:	Title or Capacity	<u>.</u>	Name and Address:
Manager	Name:	□Manager	Name:	
Member	Address:	□Member	Address:	
□Authorized	TULSA OK 74146	□Authorized	<u></u>	
Person		Person		
□Other	Other	Other		⊡Other
Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized	<u> </u>	
Person		Person		
□Other	Other	Other		Other
_				
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		Authorized		
Person		Person		
Other	Other	Other	<u>. </u>	Other

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]:

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

SAUL PENA

Typed or printed name of signee



CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>SAUL'S ROOF SYSTEMS LLC</u> whose registered agent is <u>SAUL PENA</u>, with its registered office at <u>2326 S GARNETT</u>. <u>RD STE L TULSA 74129 USA</u> Oklahoma is a <u>Domestic Limited Liability</u> <u>Company</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>23rd</u>, day of <u>January</u>, <u>2023</u>.

Touin Toingin

Secretary Of State