# M23000023228

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only
<



01/17/23--01015--018 ++125.00

168 17 PH 4:50

FEB Z 2 2023

#### COVER LETTER

**Registration Section** TO: **Division of Corporations** 

Kidd & Company, 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:

	Name of Person
Kidd & Company, LLC	
	Firm/Company
1455 East Putnam Avenu	ue
	Address
Old Greenwich, CT 068	70
	City/State and Zip Code
cwebb@kiddcompany.con	n
E-mail	address: (to be used for future annual report notification)
	•
r information concerning this ma	atter, please call: 203 661-0070
r information concerning this ma	atter, please call: at ()
r information concerning this ma Clarice E Webb Name of Contact 1ailing Address:	atter, please call: at (203) 661-0070 at (Area CodeDaytime Telephone Number Street Address:
r information concerning this ma Darice E Webb Name of Contact Lailing Address: Registration Section	atter, please call: at (203) <u>661-0070</u> at (Area Code Daytime Telephone Number <u>Street Address:</u> Registration Section
r information concerning this ma Clarice E Webb Name of Contact <u>Tailing Address:</u> Registration Section Division of Corporations	atter, please call: <u>at (203</u> ) <u>661-0070</u> <u>Area Code</u> Daytime Telephone Number <u>Street Address:</u> Registration Section Division of Corporations
r information concerning this ma Clarice E Webb Name of Contact <u>failing Address:</u> Registration Section Division of Corporations 2.O. Box 6327	atter, please call: <u></u>
r information concerning this ma Clarice E Webb Name of Contact Lailing Address: Registration Section Division of Corporations 2.O. Box 6327	atter, please call: <u>at (203</u> ) <u>661-0070</u> <u>Area Code</u> Daytime Telephone Number <u>Street Address:</u> Registration Section Division of Corporations
r information concerning this ma Clarice E Webb Name of Contact Lailing Address: Registration Section Division of Corporations 2.O. Box 6327 Callahassee, FL 32314	atter, please call: <u>at</u> ( <u>203</u> ) <u>661-0070</u> <u>Area Code</u> <u>Daytime Telephone Number</u> <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
er information concerning this ma Clarice E Webb Name of Contact Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314 Enclosed is a check for the follow Please make check payable to: FL	atter, please call: <u>at</u> ( <u>203</u> ) <u>661-0070</u> <u>Area Code</u> <u>Daytime Telephone Number</u> <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2023

CLARICE E WEBB 1455 E PUTNAM AVE OLD GREENWICH, CT 06870

SUBJECT: KIDD & COMPANY, LLC Ref. Number: W23000012227

We have received your document for KIDD & COMPANY, 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable : "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer 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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 823A00002239



www.sunbiz.org

## 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:

registration.) ne penalty lic S 6	ame		FII nuniber, H		
S	ame	Addressi			
S	ame	Address			
-					
- : <u>NOT</u> ao	cceptable)			2023	
			:'	FEB	
			82 <u>5</u>	<u> </u>	ς.
_			320: Florida	÷	Florida

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.

Gund Milhan

(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:	<u>Title or Capacity:</u>		Name and Address:
□Manager	William J. Kidd	□Manager	Name:	
∎Member	Address:	□Member	Address:	
Authorized	Greenwich, CT 06830	Authorized		
Person		Person	· <b>_</b> ·	
Other	Other	Other		□Other
□Manager	Name:	□Manager	Name:	
■Member	51 Clapboard Ridge Rd	□Member	Address:	
□Authorized	Greenwich, CT 06830	Authorized		
Person		Person		<u></u>
Other	Other	Other		Other
□Manager	Name:	□Manager	Name:	
	Address:	□Member		
		Authorized		
Person		Person		
DOther		□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.

Clorun Wito

Clarice E Webb

Typed or printed name of signee

Signature of an authorized person

# Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: January 09, 2023

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.

A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

### **Business Details**

Business Name	KIDD & COMPANY LLC	
Business ALEI	US-CT.BER:0545763	· · · · ·
Formation Date	10/15/1996	

LI Hudled

Secretary of the State