M23000003186

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S. FRANKLIN MAR 1 3 2023

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJECT: RONALACDAVLS LLC							
SUDJI	Name of Limited Liability Company						
	closed "Application by Foreign Limited Liability Comp ce, and check are submitted to register the above refere						
Please	return all correspondence concerning this matter to the	following:					
	Romald	me of Person	-				
		Tm/Company	-				
	140 Kelsey Ri	Addiess	- - el				
FREEFORT ME 04032 City/State and Zip Code							
		for future annual report notification)	-				
For fur	her information concerning this matter, please call:						
	RouAld DAULS Name of Contact Person	at (540) 208-0651 Area Code Daytime Telephone Number					
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327	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 S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 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

name unavailable, enter alternate name adopted for the purpose of transacting business in Flo	orida. The afterna	te name must include "Limited Liability	Company," "L.L.C," or "L.L.C.
(Jurisdiction under the law of which foreign limited liability company is organized)	3	92 - 140 48 (FEI number, 17 a)	771
10-12-22			ppncable)
(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	egistration.) ne penalty liabilit	y)	
140 Kelsey Ridge Rd eet Address of Principal Office)	6	(Mailing Address)	<u> </u>
FREFORT ME 04032			<u> </u>
	<u></u>		
Name and street address of Florida registered agent: (P.O. Box	NOT accep	table)	ζ '
Name: Jeff DAUIS			
Office Address: 2710 Cypns Trace GR	#30	04/	
NAPLES, FL		Florida <u>34//4</u> (Zip code)	
gistered agent's acceptance: ving been named as registered agent and to accept service of p ignated in this application, I hereby accept the appointment as comply with the provisions of all statutes relative to the proper I accept the obligations of my position as registered agent.	registered a	igent and agree to act in thi	s capacity. I further

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	Name: Jeff DAULS	∆ Manager	Name: Royald CDAVIS
□Member	Address:	□Member	Address: 140 Kelsy Rilse Ret
□Authorized	27W Cypnex True Cir # 304	□Authorized	FREEDONT ME 0403.
Person	MAPLE, FL 34/19	Person	
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	<u> </u>
Other	Other	Other	•
			·
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	1
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. 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.

State of Maine



Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the reports of formation, amendment and cancellation of articles of organization of limited liability companies and annual reports filed by the same.

I further certify that RONALD C DAVIS LLC is a duly formed limited liability company under the laws of the State of Maine and that the date of formation is September 15, 2022.

I further certify that said limited liability company has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the articles of organization and that according to the records in the Department of the Secretary of State, said limited liability company is a legally existing limited liability company in good standing under the laws of the State of Maine at the present time.



In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this first day of March 2023.

Shenna Bellows
Secretary of State



February 16, 2023

RONALD C DAVIS 140 KELSEY RIDGE RD FREEPORT, ME 04032 US

SUBJECT: RONALD C DAVIS LLC Ref. Number: W23000021696

We have received your document for RONALD C DAVIS 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: 623A00003834

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