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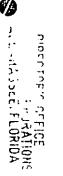
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	CERTIFIED COPY	
xx	РНОТОСОРУ	
	CUS	
xx	FILING	FOREIGN LLC
	ROMAN PHILLIPS LLC	
- - -	CORPORATE NAME AND DOCUM	ENT#)
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_	(CORPORATE NAME AND DOCUM	ENT#)
	CORPORATE NAME AND DOCUM	

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	Lisbility Company," "L	EC.," or "LEC.")	
frame unavailable coay alternate	name adopted for the purpose of transacting business in Fi	orida. The alternate name mu	ust include "Limited Liability Company.	LLC ~LLC
	and the purpose of the section of th			
DELAWARE	which foreign limited liability company is organized)	3.	(FFI number, if applicable)	
(Jurisdiction under the law of s	vhich foreign limited liability company is organized)		(FFI number, if applicable)	
May 1, 2022				
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	registration.) ne penalty limbility)		
7417 South Flagler Dr	rive			
rect Address of Principal Office)		(Mailing A	(ddress)	
West Palm Beach, FL	33405			
				2
			<u> </u>	202
				7 :
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)		; ; ;
	Registered Agent Solutions, Inc.			
Name:		,		10:3
	155 Office Plaza Dr. Suite A			သို
Office Address:		<u> </u>		7
	Tallahassee	, Flor	32301	
	(Cáv)	, rior	(Zip code)	

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.

Adam Saldana, Asst. Secretary

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]: Name and Address: Title or Capacity: Title or Capacity: Name and Address: Caroline Helene Reyes Name: _____ Manager Name: ☐ Manager 7417 South Flagler Drive Address: ______ □Member ■ Member West Palm Beach, FL 33405 □ Authorized ☐ Authorized Person Person Other____ □Other_____ □Other____ □Other Name: _____ Name: _____ □ Manager Address: ______ ☐ Member Mission □ Authorized □ Authorized Person Person □Other ☐Other____ Other___ □Other__ □Manager Name: □ Manager Address: ☐ Member Address: ______ □Member □ 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. Caroline Helene Reyes

Typed or printed name of vignee

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ROMAN PHILLIPS LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE THIRTY-FIRST DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROMAN PHILLIPS"

LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF APRIL, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

at corp.delaware.gov/aut

Authentication: 203050780

Date: 03-31-23