

M23000006423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

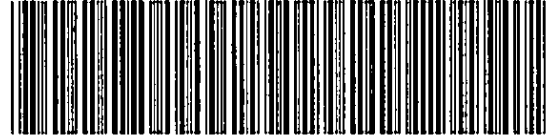
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Rec'd  
5-17-23  
W23000062499

Office Use Only



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05/18/23--01008--003 \*\*55.00

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2023 MAY 17 AM 10:22  
CLERK OF COURT  
CLERK OF COURT

M. SOLOMON

MAY 18 2023

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ALL STATE ROOF AND SOLAR, LLC.  
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:

ROB BROWN  
Name of Person

ALL STATE ROOF AND SOLAR, LLC.  
Firm/Company

11038 NORTH HIGHLAND BLVD.  
Address

HIGHLAND, UT 84603  
City/State and Zip Code

ROB@ALLSTATE ROOFANDSOLAR.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROB BROWN at ( 901 ) 362-5870  
Name of Contact Person Area Code Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**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**

☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

2023 MAY 17 AM 10:22

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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:

1. ALL STATE ROOF AND SOLAR, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. UTAH 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 515 N. FLAGLER DR. 6. \_\_\_\_\_  
(Street Address of Principal Office) (Mailing Address)

SUITE P-300  
WEST PALM BEACH, FL 33401

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

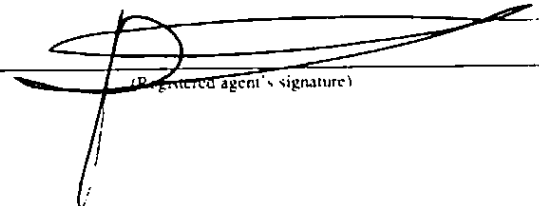
Name: SUNSHINE CORPORATE FILMS, LLC.

Office Address: 7901 4th ST N, STE 300

ST. PETERS BURG, Florida 33702  
(City) (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.

  
(Registered agent's signature)

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CLERK OF STATE  
TREASURY

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]:

<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input type="checkbox"/> Manager	Name:	<u>PAUL EWING</u>		<input type="checkbox"/> Manager	Name:	<u>ROB BROWN</u>	
<input type="checkbox"/> Member	Address:	<u>515 N. FLAGLER</u>		<input type="checkbox"/> Member	Address:	<u>515 N. FLAGLER</u>	
<input type="checkbox"/> Authorized		<u>SUITE P-300</u>		<input type="checkbox"/> Authorized		<u>SUITE P-300</u>	
Person		<u>WEST PALM BEACH, FL 33401</u>		Person		<u>WEST PALM BEACH, FL 33401</u>	
<input checked="" type="checkbox"/> Other	<u>CEO</u>	<input type="checkbox"/> Other		<input checked="" type="checkbox"/> Other	<u>COO</u>	<input type="checkbox"/> Other	

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person \_\_\_\_\_  
☐ 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.

Robert Brown  
Signature of an authorized person

ROB BROWN

Typed or printed name of signer



Utah Department of Commerce  
Division of Corporations & Commercial Code  
160 East 300 South, 2nd Floor, PO Box 146705  
Salt Lake City, UT 84114-6705  
Service Center: (801) 530-4849  
Toll Free: (877) 526-3994 Utah Residents  
Fax: (801) 530-6438  
Web Site: <http://www.commerce.utah.gov>

April 11, 2023

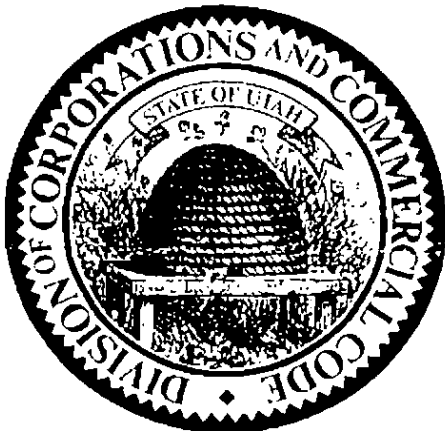
PAUL EWING  
11038 HIGHLAND BLVD  
HIGHLAND, UT 84003

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## CERTIFICATE OF EXISTENCE

Registration Number: 13312158-0160  
Business Name: ALLSTATE ROOF AND SOLAR, LLC  
Registered Date: 03/16/2023  
Entity Type: LLC - DOMESTIC  
Current Status: CURRENT

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (**unless Delinquent**); and, that Articles of Dissolution have not been filed.



*L. Veillette*

Leigh Veillette  
Director  
Division of Corporations and Commercial Code



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 1, 2023

ROB BROWN  
11038 NORTH HIGHLAND BLVD.  
HIGHLAND, UT 84003

SUBJECT: ALLSTATE ROOF AND SOLAR, LLC  
Ref. Number: W23000062499

We have received your document for ALLSTATE ROOF AND SOLAR, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN CORP, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

There is a balance due of \$55.00.

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) 245-6053.

Yvette Scott  
Supervisor

Letter Number: 023A00009638

**RECEIVED**

**MAY 17 2023**