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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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. RMG Oviedo, LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

Delaware		3.		
(Jurisdiction under the law of w	nich foreign limited liability company is organized)	<u>.</u>	(FEI number, if .	applicable)
7/21/2023				_
	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605.0905, F.S. to deter	to registratio mine penalty	t) liability)	
7123 Red Bug Lake Ro	bad		7123 Red Bug Lake Road	
eet Address of Principal Office)		6.	(Mailing Address)	
Oviedo, Florida 32765		Oviedo, Florida 32765		
	<u>.</u>			
Nume and street addree	e of Florida supietarad quant: (P.O. Ba		accontublo)	
isame and succi addres	s of Florida registered agent: (P.O. Bo	<u> 1001</u>	acceptable)	202
Name:	C T Corporation System			2023 JUL 3 SECREDAN TALLAN
Office Address:	1200 S. Pine Island Road			EASS: MALLOF
	Plantation		33324 , Florida	
	(City)		(Zip code)	$-\frac{1}{2}$

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, Increby 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.

Bernadette Baker, Assistant 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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name:RMG Acquisition Company, LLC	□Manager	Name: Jason Kemp
Member	Address: 32990 Stagecoach Blvd	□Member	Address:
□Authorized	Evergreen, Colorado 80439	■Authorized	Evergreen, Colorado 80439
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
-			
□Member	Address:	□ Methber	Address:
□Authorized		□Authorized	
Person		Person	<u> </u>
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	Member	Address:
□Authorized		Authorized	<u></u>
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.

Jason Kemp 616607R8A9714C9

Signature of an authorized person

Jason Kemp

Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RMG OVIEDO, 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 TWENTY-SEVENTH DAY OF JULY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RMG OVIEDO, LLC" WAS FORMED ON THE TENTH DAY OF JULY, A.D. 2023.

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



Juffrey W. Dudloch, Sectoriary of SLATE)

Authentication: 203843051 Date: 07-27-23

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You may verify this certificate online at corp.delaware.gov/authver.shtml

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