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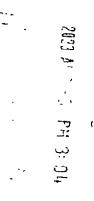
| (Re | equestor's Name) | | | |
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| (Ci | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | usiness Entity Nar | me) | | |
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| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to | Filing Officer. | | | |
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Office Use Only



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COVER LETTER

TO:

Registration Section

| Div | vision of Corporations | | | | |
|--|---|--|--|--|--|
| SUBJECT: | | | | | |
| | Nam | e of Limited Liability Company | | | |
| | | Company for Authorization to Transact Business in Florida," Certificate o referenced foreign limited liability company to transact business in Florida | | | |
| Please return | n all correspondence concerning this matter to | o the following: | | | |
| | Roosevelt Denzell Everett Henderson | | | | |
| | | Name of Person | | | |
| | Roosevelt & Sons LLC | | | | |
| | | Firm/Company | | | |
| | 1127 Whitewater Place | | | | |
| Address | | | | | |
| | Herndon, VA 20170 | | | | |
| | C | ity/State and Zip Code | | | |
| | rooseveltandsonslle@gmail.com | | | | |
| | E-mail address: (to be | used for future annual report notification) | | | |
| For further i | nformation concerning this matter, please cal | N: | | | |
| Ro | osevelt Denzell E. Henderson | 202 629-8049 | | | |
| | Name of Contact Person | Area Code Daytime Telephone Number | | | |
| | niling Address: gistration Section | Street Address: Registration Section | | | |
| Division of Corporations | | Division of Corporations | | | |
| P.O. Box 6327 Tallahassee, FL 32314 | | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | |
| Ple | closed is a check for the following amount: ase make check payable to: FLORIDA DEP \$125.00 Filing Fee S130.00 Filing Fee Certificate of | PARTMENT OF STATE e & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate | | | |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605.0002, 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 "Limite | d Liabilit | y Company," "L.L.C.," o | "LLC.") | | | | |
|---|--|---------------------------------------|--------------------------------|--------------|-------------------|---------------------|--|--|
| | ame adopted for the purpose of transacting business in F | | | | | | | |
| | ame adopted for the purpose of transacting business in F | lorida The | | "Limited Li. | ability Company," | "1,,1,,C," or "1,1. | | |
| Virginia | | EIN: 86-3957491 3. | | | | | | |
| 2. (Jurisdiction under the law of which foreign limited liability company is organized) | | | 3. (FEI number, if applicable) | | | | | |
| | | | | | | | | |
| J | (Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ | registration | n I Tiability | | | | | |
| 1127 Whitewater Place | | and persons | 1127 Whitewater Pl | ace | | | | |
|). | · | 6. | (Mailing Address) | | | | | |
| street Address of Principal Office) | | | (Maining Authors) | | | | | |
| Herndon, VA | | | Herndon, VA | | | | | |
| 20170 | | | 20170 | | | 212 | | |
| | | | | | | *.* | | |
| 7. Name and street addres | s of Florida registered agent: (P.O. Box | NOT | acceptable) | | | | | |
| | 2 | | | | | 4. 144 | | |
| | Roosevelt Henderson JR. | | | | | Ţ | | |
| Name: | | | | | - | رن | | |
| | 1215 Barcia Drive | | | | - | PK 3: 11 | | |
| Office Address: | | · · · · · · · · · · · · · · · · · · · | | | - | <u> </u> | | |
| | Pensacola | | 325 | | | | | |
| | (Cny) | | | (ip 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)

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 Capacit | <u>y:</u> | Name and Address: |
|--------------------|--------------------------------------|------------------|------------|-------------------|
| ■Manager | Name: Roosevelt Denzell E. Henderson | □Manager | Name: | |
| □Member | Address: | □Member | Address: | |
| □Authorized | Herndon, Virginia 20170 | □Authorized | | |
| Person | | Person | | |
| □Other | Other | □ Other | | []Other |
| □Manager | Name: | □Manager | Name: | |
| □Member | Address: | □Member | Address: _ | |
| □Authorized | | □Authorized | | |
| Person | | Person | | ··· |
| □Other | Other | □ Other | | Other |
| □Manager | Name: | □Manager | Name: | |
| □Member | Address: | □Member | Address: _ | |
| □Authorized | | □Authorized | | |
| Person | | Person | | |
| 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.

Signature of authorized person

Roosevelt Denzell Everett Henderson

Commonbrealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That Roosevelt & Sons LLC is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on May 13, 2021; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

That the limited liability company is current in the payment of all registration fees assessed against it by the Commission pursuant to the Virginia Limited Liability Company Act as of the date set forth below.

Nothing more is hereby certified.

ORATION COMMISSION

Signed and Sealed at Richmond on this Date:

August 1, 2023

Bernard J. Logan, Clerk of the Commission