

8/15/23 9:36 AM

Division of Corporations

Florida Department of State

M23000010636

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000282756 3)))



H2300028275634BC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.
Account Number : 120080000045
Phone : (302)645-7400
Fax Number : (302)645-1280

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: lr@grellas.com

**Foreign Limited Liability Company
ROAM BROKERAGE LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

RECEIVED
2023 AUG 15 PM 3:35
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLahassee, FL

2023 AUG 15 PM 3:21
DEPARTMENT OF STATE
TALLahassee, FL

FILED



Electronic Filing Menu

Corporate Filing Menu

Help

(((H23000282756 3)))

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDAIN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ROAM BROKERAGE LLC

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

(If none available, enter alternate name adopted for the purpose of transacting business in Florida. If alternate name must include "Limited Liability Company," "LLC," or "LLC")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

(If Country, if applicable)

4. August 1, 2023

(Date first transacted business in Florida, if prior to registration;
(See sections 605.009(1)(A) and 605.005, F.S., to determine reporting liability.)

5. 12 Windsor Way

(Street Address of Principal Officer)

Fairport, NY 14450

6. 12 Windsor Way

(Mailing Address)

Fairport, NY 14450

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

Name: Registered Agents Inc.

Office Address: 7901 4th Street N, Ste 300

St. Petersburg 33702

(City)

Florida

(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, 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)

2023 AUG 15 PM 3:21
 SECRETARY OF STATE
 TALLAHASSEE, FL

FILED

(((H23000282756 3)))

((H23000282756 3)))

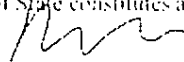
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members, managers or persons authorized to manage (up to six (6) total).

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: STEVE BENIZ	☒ Manager	Name: RAJNAQ SINGH
☐ Member	Address: 12 Windsor Way	☐ Member	Address: 24 Rembrandt Way
☐ Authorized	Fairport, NY 14450	☐ Authorized	East Windsor, NJ 08520
Person		Person	
☐ Other	☐ Other	☐ Other	☐ Other
☐ Manager	Name: ROAM HOME, INC.	☐ Manager	Name:
☒ Member	Address: 24 Rembrandt Way	☐ Member	Address:
☐ Authorized	East Windsor, NJ 08520	☐ Authorized	
Person		Person	
☐ Other	☐ Other	☐ Other	☐ Other
☐ Manager	Name:	☐ Manager	Name:
☐ Member	Address:	☐ Member	Address:
☐ 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. 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 605.029, (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

RAJNAQ SINGH

Typed or printed name of officer

((H23000282756 3)))

(((H23000282756 3)))

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ROAM BROKERAGE 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 FIFTEENTH DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROAM BROKERAGE LLC" WAS FORMED ON THE ELEVENTH DAY OF JULY, A.D. 2023.

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



7560906 8300

SR# 20233248269

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203963212

Date: 08-15-23

(((H23000282756 3)))