# M24000004752

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(Address)	
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 11, 2024

FLORIDA FILING

SUBJECT: RICH&RICH PROPERTIES LLC

Ref. Number: W24000058124

We have received your document for RICH&RICH PROPERTIES LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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) 245-6051.

KYLE D BRUMBLEY Regulatory Specialist II Supervisor

Letter Number: 724A00007900

### FLORIDA FILING & SEARCH SERVICES, INC.

April 1980 Park Company

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 04/10/2024 NAME: RICH&RICH PROPERTIES LLC TYPE OF FILING: APPLICATION COST: 130.00 RETURN: PLAIN COPY AND GOOD STANDING PLEASE ACCOUNT: FCA00000015 **AUTHORIZATION: ABBIE/PAUL HODGE** 

### **COVER LETTER**

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TO: Registration Division of C		
SUBJECT: R	ich 4 Rich Progen	ties ILC
SUBJECT:	Name o	of Limited Liability Company
The englaced "Applian	stion by Euroian Limited Liability Co	ompany for Authorization to Transact Business in Florida," Certificate of
Existence, and check a	ire submitted to register the above ref	ferenced foreign limited liability company to transact business in Florid
Please return all corres	spondence concerning this matter to t	the following:
_	Michael Br	ennan
		Name of Person
	Evans Lau	<b>,</b> )
		Firm/Company
	2300 NW	Corporate Boulevard #215 Address
		Address
	Boca Raton,	FL 3343] y/State and Zip Code
	City	//State and Zip Code
	mbrennan @	D evans lawfl. com  ised for future annual report notification)
For further information	n concerning this matter, please call:	
Tot lattice information	a concerning this matter, please can.	
Mich	rue Brennan	at (56) 445-4714  Area Code Daytime Telephone Number
Mailing Add Registration		Street Address: Registration Section
_	f Corporations	Division of Corporations
P.O. Box 6	•	The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303
	check for the following amount: check payable to: FLORIDA DEPA liling Fee \$\infty\$\$\$\$130.00 Filing Fee	
\$125,50 L	Certificate of	

# [ampersand, no comma]

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

	Ch Properties LL Limited Liability Company; must include "Limitation Limitation Limitati			any," "L.L.C," or "LLC.")
2. Pennsh you	hich foreign limited liability company is organized)	3	(FEI number, if applica	ble)
4. 4/1/202	(Date first transacted business in Florids, if prior (See sections 605,0904 & 605,0905, F.S. to deter	o registration.) mine penalty liability)		
5. 143 Beac (Street Address of Principal Office)	h 97th Smeet	6	Came	
•	Beach, NY 11693			<u>_</u>
				2124
7. Name and street address	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptab	ole)	124 ATR 10
Name:	Law Offices of Ja	ison Eva	ns, LCC	0 ·
Office Address:	2300 NW Con	park Blo	sd., #215	<del></del>
	Boca Raton		, Florida 3343 J	
designated in this applicate to comply with the provise	otance: egistered agent and to accept service of tion, I hereby accept the appointment tions of all statutes relative to the prope s of my position as registered agent.	as registered age	ent and agree to act in this ca	pacity. I further agree
	Muleul 1	's signature)	- (For the f	inn)

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: Name: Walton Richardson Manager ☐ Manager Address: 143 Beach 97th Smeet Member □Member Address: Rockawa, Beach, NY\_11693\_Authorized ☐ Authorized Person Person □Other\_\_ Other\_\_\_\_ Other\_\_\_\_ □Other\_\_\_\_ Name: Manager ☐ Manager ☐ Member Address: Address: □Member ☐ Authorized ☐ Authorized Person Person Other\_\_\_\_ Other\_\_\_\_ Other Other □ Manager Name: \_\_\_\_\_ Manager Name: □Member ☐ Member Address: 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. 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.

### Pennsylvania Department of State

Bureau of Corporations and Charitable Organizations PO Box 8722 | Harrisburg, PA 17105-8722 T:717-787-1057 dos.pa.gov/BusinessCharities

Regarding: Rich&Rich Properties LLC

Issuance Date: April 10, 2024 Request Type: Subsistence Certificate

Request No.: 033850728 File No.:

000996246 Receipt No.:

Filing Type: **Domestic Limited Liability** 

Company

Filing Subtype: **Limited Liability Company** 

Initial Filing Date: February 03, 2020

Status: Active

#### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

Rich&Rich Properties LLC

is currently subsisting on the records of the Department of State as of the issuance date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

0007008136

Albert Schmidt

Secretary of the Commonwealth

Men 5 Salan

Verify this certificate online at www.file.dos.pa.gov