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### **COVER LETTER**

SUBJECT:	RAP PRO	POPERTIES LLC	
30DJEC1:		Name of Limited Liability Company	
		ted Liability Company for Authorization to Transact Business in Florida," Certific ter the above referenced foreign limited liability company to transact business in F	
Please return all o	correspondence concerning	g this matter to the following:	
	Roy A	A. PAVACICH  Name of Person	
		Name of Person	
	RAT PR	POPERTIES LLC Firm/Company	
		Firm/Company	
	13123 567	THE COURT E.	
		Address	
	PARRISA	FC 34219 City/State and Zip Code	
		•	
	RPR	RPAPCAOL, COM	
-	E-mail ad	address: (to be used for future annual report notification)	
For further inforr	nation concerning this matte	ter, please call:	
20	Y A PAVACICH	Person Area Code Daytime Telephone Number	
	Name of Contact P	Person Area Code Daytime Telephone Number	
Mailing	Address:	Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	
		Tallahassee, FL 32303	
Enclose	d is a check for the followin		
		ORIDA DEPARTMENT OF STATE	

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

	TION 605.0902, FLORIDA STATUTES, THE F SINESS IN THE STATE OF FLORIDA:	OLLOWING IS S	UBMITTED TO REGISTER A FO	REGN LIMTI	TETO I LABILLITY
1. RAP P	ROPERTIES LLC Limited Liability Company; must include "Limite	ed Linbility Compe	ny.""LL.C.," or "LLC.")		
· Crare a	tame adopted for the purpose of transacting business in F		name must include "Limited Liability Co.  06-1626365  (FEI number, if appli	mpany, "L.L.C."	or "LLC.")
4	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration ) line penalty liability)			
5. 13/03 56 TH (Street Address of Principal Office)	COURT E.	6	SAME Mailing Address)		
PARKISH ,	FL 34219				
7. Name and street address	s of Florida registered agent: (P.O. Box	x <u>NOT</u> accepta	able)		
Name:	Roy A. PAVACICA		. 9	,	(j)
Office Address:	ROY A. PAVACICA 13123 SE TO COUFE PARRISH	- <u>t.</u>	, Florida 34219	- 13 - 13	
Registered agent's accep Having been named as re	gistered agent and to accept service of	process for the	(Zip code)  above stated limited liability	© © company a	t the place
designated in this applica to comply with the provisi	tion, I hereby accept the appointment a ons of all statutes relative to the proper s of my position as registered agent.	is registered ag	ent and agree to act in this o	capač <del>it</del> y. I fi	urther agree
	(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 Capacity: Name and Address: Name: Roy A. PAVACICH Name: □Manager □Manager Member □Member Address: **⊠**Authorized ☐ Authorized Person Person □Other\_\_\_\_\_\_ □Other\_\_\_\_ □Other\_\_\_\_\_ □Other\_\_\_\_ □Manager Name: \_\_\_\_\_ □Manager □Member Address: □Member Address: \_\_\_\_\_ ☐ Authorized ☐ Authorized Person Person □Other □Other\_\_\_\_\_ □Other\_\_\_\_\_ □Manager Name: Name: □Manager □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. 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. Signature of an authorized person

## Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: Monday, August 19, 2024 3:13 PM

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.

A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

#### **Business Details**

Business Name	RAP PROPERTIES LLC	
Business ALEI	US-CT.BER:0677466	
Formation Date	03/29/2001	

Secretary of the State

Business ALEI: US-CT.BER:0677466 Certificate Number: C-00139955
Note: To verify this certificate, visit Business.ct.gov