

M24000012957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W24-115716

Office Use Only



000430635770

08/13/24--01002--004 **160.00

2024 OCT -9 11:24U

OCT 10 2024
Crumbley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2024

MATTHEW HIBBARD
382 NE 191ST ST., #97857
MIAMI, FL 33179

SUBJECT: ROAR AFRICA LLC
Ref. Number: W24000115716

We have received your document for ROAR AFRICA LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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: 624A00018336

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROAR AFRICA LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MATTHEW HIBBARD

Name of Person

ROAR AFRICA LLC

Firm/Company

382 NE 191ST ST #97857

Address

MIAMI, FL 33179

City/State and Zip Code

MATT@ROARAFRICA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MATTHEW HIBBARD

646

233-1300

Name of Contact Person

at (_____) _____

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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 LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ROAR AFRICA LLC

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

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

DELAWARE

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

20-3610549

3. (FEI number, if applicable)

FEB 09, 2024

4. (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

111 LINCOLN RD

5. (Street Address of Principal Office)

382 NE 191ST ST #97857

6. (Mailing Address)

SUITE 500

MIAMI BEACH, FL 33139

MIAMI, FL 33179

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

Name: Corporation Service Company

Office Address: 1201 Hays St

Tallahassee

(City)

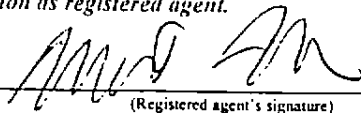
, Florida

32301

(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 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)

2024-01-09 11:24

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:
☐ Manager Name: MATTHEW HIBBARD
☐ Member Address: 382 NE 191ST ST #55338
☒ Authorized MIAMI, FL 33179
Person
☐ Other ☐ Other

Title or Capacity: Name and Address:
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

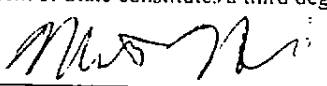
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ 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.

 7/30/2024

Signature of an authorized person
MATTHEW HIBBARD

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "ROAR AFRICA LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF CONVERSION", FILED THE TWELFTH DAY OF FEBRUARY, A.D. 2024, AT 9:54 O'CLOCK A.M.

CERTIFICATE OF FORMATION, FILED THE TWELFTH DAY OF FEBRUARY, A.D. 2024, AT 9:54 O'CLOCK A.M.

CERTIFICATE OF MERGER, FILED THE SEVENTH DAY OF MARCH, A.D. 2024, AT 12:37 O'CLOCK P.M.

CERTIFICATE OF CHANGE OF REGISTERED AGENT, FILED THE TWENTIETH DAY OF AUGUST, A.D. 2024, AT 3:49 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "ROAR AFRICA LLC".



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.

3087241 8310

SR# 20243728849

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

Authentication: 204438064

Date: 09-19-24

Delaware

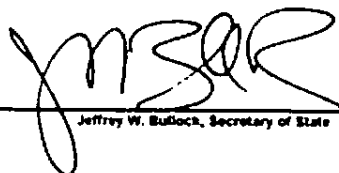
The First State

Page 2

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROAR AFRICA
LLC" WAS FORMED ON THE TWELFTH DAY OF FEBRUARY, A.D. 2024.

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




Jeffrey W. Bullock, Secretary of State

3087241 8310

SR# 20243728849

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

Authentication: 204438064

Date: 09-19-24