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(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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please*

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 523519 5021613

AUTHORIZATION :

COST LIMIT : \$ 1,000.00

ORDER DATE: March 3, 2015

ORDER TIME : 9:27 AM

ORDER NO. : 523519-005

CUSTOMER NO: 5021613

FOREIGN FILINGS

NAME: RIVIERA PLAZA HOLDINGS LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

				• •	
TO: Registration Sec Division of Cor					
SUBJECT: Riviera F	•	•		•	
Nan	ne of Foreign Limited Part	nership or Limited	Liability	Limited Partnership	
partnership to transact bu			o registe	r a foreign limited partnership or limited	d liability limite
Jacquelyn Werner					
	Contact Person		_		
c/o.Wexford Capita	al LP				
	Firm/Company				
411 West Putnam	Ave				
4.00	Address		_		
Greenwich CT 068	30				
	ty, State and Zip Code				
jwerner@wexford.c					
E-mail address: (to be u	sed for future annual repor	rt notification)			
For further information of	oncerning this matter, pleas	se call:			
Jacquelyn Werner		_at (203	862-	-7000	
Name of Contac	t Person	Area Code a	nd Dayt	ime Telephone Number	
Enclosed is a check for th	e following amount:				
[]\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	☐ \$1,008.75 Filing Fees and Certificate of Status	☐ \$1,052.50 Filing Fees and Certified Copy		☐ \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle	MAILING ADI Registration Sec Division of Corp P. O. Box 6327 Tallahassee, FL	tion orations	,	

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

EMARIO PHI 20 , Riviera Plaza Holdings LP (Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix. 3. March 2, 2015 ₂ Delaware State or Country of Formation Date of Formation 4. Federal Employer Identification Number: 5. Name of Registered Agent for Service of Process and Florida Street Address: Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 6. 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. Corporation Service Company Courtney Williams Asst. Vice President Signature of Registered Agent 7. Principal Office: 8. Mailing Address: c/o Wexford Capital LP c/o Wexford Capital LP 411 West Putnam Ave, Suite 125 411 West Putnam Ave, Suite 125 Greenwich CT 06830 Greenwich CT 06830 9. If limited partnership is a limited liability limited partnership, check box 10. Name, principal office address, and mailing address of each general partner: Name of General Partner:____Riviera Acquisition LLC Name of General Partner:_____ 411 West Putnam Ave, Suite 125 Street Address: Street Address: Greenwich CT 06830 411 West Putnam Ave, Suite 125 Mailing Address: Mailing Address:___ Greenwich CT 06830 Name of General Partner:_______Name of General Partner:______ Street Address: Street Address:

Mailing Address: Mailing Address: ___

Name of Gene	eral Partner:	Name of General Partner:			
Street Address	Address: Street Address:				
Mailing Address:		Mailing Address:	Mailing Address:		
12. Attached is a c Florida Departmer	ertificate of existence duly authenticat it of State, by the Secretary of State or	after the date this document is filed by the Florida Department of Stated, not more than 90 days prior to the delivery of this application to the other official having custody of the entity's records in the jurisdiction	he		
the law of which it Signed this <u>3</u>		Acquistion LC, its general partn	⁄ـى		
	<u>عب </u>	pature of a general partner			
-		stated herein are true and the individual is aware that false informati itutes a third degree felony as provided for in s.817.155, F.S.	on		
(Filing Fees: Certified Copy (optional): Certificate of Status (optional):	 \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75 			

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Page 2 of 2

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RIVIERA PLAZA HOLDINGS LP" 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 THIRD DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RIVIERA PLAZA HOLDINGS LP" WAS FORMED ON THE SECOND DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5701945 8300

150307905

Jeffrey W Bullock, Secretary of State

AUTHENTY CATION: 2166537

DATE: 03-03-15

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