B1900000039

(Requestor's Name)				
(Address)				
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(Business Entity Name)				
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015,19

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

ACCOUNT NO. : I2000000195

REFERENCE : 626673

COST LIMIT : \$ 1000.00

AUTHORIZATION :

ORDER DATE: February 8, 2019

ORDER TIME : 9:27 AM

ORDER NO. : 626673-015

CUSTOMER NO: 4804708

FOREIGN FILINGS

NAME: RGM SIF FUND I LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: RGM SIF Fund I LP		
	Partnership or Limited Liability Limited Partnership	
The enclosed application, certificate of status an partnership to transact business in Florida. Please return all correspondence concerning this	nd fees are submitted to register a foreign limited partnership or limited liabs matter to:	oility limited
Patrick D. Canavan		
Contact Person		
Seward & Kissel LLP		
Firm/Company		
One Battery Park Plaza, 24th Floor		
Address		
New York, New York 10004		
City, State and Zip Code		
rmoses@rgmcapital.com		
E-mail address: (to be used for future annual re-	eport notification)	
For further information concerning this matter, p	please call:	
Patrick D. Canavan	at (212) 574-1618	
Name of Contact Person	Area Code and Daytime Telephone Number	
Enclosed is a check for the following amount:		
\$1,000.00 Filing Fees S1,008.75 Filing and Certificate of S35 Registered Agent Fee)	<u> </u>	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

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

RGM SIF Fund I	LP			
Acceptable Limited	Partnership suffixes: Limited Partners	oility Limited Partnership, which must include suffix) ship, Limited, L.P., LP, or Ltd. Limited Liability Limited Partnership, L.L.L.P. or LLLP.		
If name unavailable		ership or limited liability limited partnership proposes to regis da; must contain acceptable suffix.		
2. Delaware		3. P.O.	2013	
	ate or Country of Formation	Date of Formation	F. 3	
4. Federal Employe	r Identification Number:		812	
5. Name of Register	ed Agent for Service of Process and	Florida Street Address:		
Corporation Service	Company	- 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (三 (
1201 Hays Street		โดกเล	AM 10: 28	
Tallahassee, FL 323	01			
oj ali statutes reta my position as reg	distered agent. Corporation Service By:	rmance of my duties, and I am familiar with and accept the ob- Company Roxanne Turner ure of Registered Agent Asst. Vice President	nigations of	
7. Principal Office:		8. Mailing Address:	failing Address:	
9010 Strada Stell Co	ourt	9010 Strada Stell Court		
Suite 105		Suite 105		
Naples, FL 34019		Naples, FL 34019		
9. If limited partne	rship is a limited liability limited par	rtnership, check box.		
10. Name, principa	l office address, and mailing address	s of each general partner:		
Name of Genera	RGM SIF GP, LLC	Name of General Partner:		
Street Address:	9010 Strada Stell Court, Suite 105			
Silect Addiess.	Naples, FL 34019	Street Address:		
NACTO AND AND AND	9010 Strada Stell Court, Suite 105	Mailing Address:		
Mailing Address: Naples, FL 34019	Naples, FL 34019			
Name of General		Name of General Partner:		
Street Address:		Street Address:		
Mailing Address	:	Mailing Address:		

Name of General Partner:	Name of General Partner:				
Street Address:	Street Address:				
Mailing Address:	Mailing Address:				
11. Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.					
12. Attached is a certificate of existence duly authenticated, not m Florida Department of State, by the Secretary of State or other offithe law of which it is organized.	ore than 90 days prior to the delivery of this application to the icial having custody of the entity's records in the jurisdiction under				
Signed this 8th day of February	,20 19				
Signature of a general partner					
The individual signing this document affirms that the facts stated I submitted in a document to the Department of State constitutes a transfer of the constitutes as the constitute of the constitution of the consti					

Page 2 of 2

\$52.50 \$8.75

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Filing Fees: Certified Copy (optional): Certificate of Status (optional):

ON FEB 12 AH IO: 28

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RGM SIF FUND I 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 ELEVENTH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RGM SIF FUND I LP" WAS FORMED ON THE EIGHTH DAY OF FEBRUARY, A.D. 2019.

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

Authentication: 202238350

Date: 02-11-19

7274008 8300 SR# 20190895203