

Division of Corporations

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Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : GREENSPOON MARDER, P.A.  
Account Number : 076064003722  
Phone : (888) 491-1120  
Fax Number : (954) 343-6962

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: jimjr@condormgt.com

**FOREIGN PROFIT/NONPROFIT CORPORATION  
RILEY FAMILY CORPORATION**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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JAN 04 2015  
D. BRUCE

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

RILEY FAMILY CORPORATION

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. MINNESOTA 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. APRIL 11, 1997 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2320 LEXINGTON AVENUE SOUTH, MENDOTA HEIGHTS, MN 55120  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: GREENSPOON MARDER, P.A.

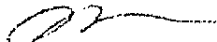
Office Address: 200 EAST BROWARD BLVD., SUITE 1800

FORT LAUDERDALE, Florida 33301  
(City) (Zip code)

**9. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation 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.*

**Thomas Coyle, Esq., For the Firm**



(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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## 11. Names and business addresses of officers and/or directors:

## A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: JAMES R. RILEY, JR.

Address: 2320 LEXINGTON AVENUE SOUTH

MENDOTA HEIGHTS, MN 55121

Director: JONATHAN P. RILEY

Address: 2320 LEXINGTON AVENUE SOUTH

MENDOTA HEIGHTS, MN 55121

## B. OFFICERS

President: JONATHAN P. RILEY

Address: 2320 LEXINGTON AVENUE SOUTH

MENDOTA HEIGHTS, MN 55121

CEO: JAMES R. RILEY, JR.

Address: 2320 LEXINGTON AVENUE SOUTH

MENDOTA HEIGHTS, MN 55121

Secretary: JONATHAN P. RILEY

Address: 2320 LEXINGTON AVENUE SOUTH, MENDOTA HEIGHTS, MN 55121

Treasurer: JAMES R. RILEY, JR.

Address: 2320 LEXINGTON AVENUE SOUTH, MENDOTA HEIGHTS, MN 55121

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. \_\_\_\_\_  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. James Riley CEO

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	Riley Family Corporation
Date Filed:	04/11/1997
File Number:	9P-868
Minnesota Statutes, Chapter:	302A
Home Jurisdiction:	Minnesota

This certificate has been issued on: 12/30/2015



A handwritten signature in cursive script that reads "Steve Simon".

Steve Simon  
Secretary of State  
State of Minnesota