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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : M. BURR KEIM COMPANY

Account Number : 119990000242 Phone : (215)563-8113 Fax Number : (215)977-9386

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

Email	Address:			
Emall	Address:			

FLORIDA LIMITED LIABILITY CO. Riverside Real Property LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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Fax: (850) 617-6381

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2023 OCT 27 PM 4: 20

	RIDA LIMITED LIABILITY COMPANY SEE STATE ALLAHASSEE, FL
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Riverside Real Property LLC	
(Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
The mailing address and street address of the principal office	
Principal Office Address:	Mailing Address:
Principal Office Address:	Mailing Address:
Principal Office Address: 1608 Route 88, Suite 200	Mailing Address: 1608 Route 88, Suite 200

The name and the Florida street address of the registered agent are:

another business entity with an active Florida registration.)

Registered Agents In	ic	
	Name	
7901 4th Street N., S	Suite 300	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
St. Petersburg	FL	33702
City	State	Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

(((H230003752553)))

	Authorized Member	Name and Address:
"MGR" = M	anager	
<u>MGR</u>		Quinto Nexgen LLC
		1608 Route 88. Suite 200 Brick, NJ 08724
		•
	-	
	 .	
EV: Effective date is	ient if necessary) we date, if other than the listed, the date must b	date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 d
E V: Effective date is of filing.) the date insenent's effect	we date, if other than the listed, the date must he rted in this block does	date of filing:
E V: Effective date is of filing.) the date insequent's effect E VI: Other p	we date, if other than the listed, the date must be rted in this block does ive date on the Departi	ne specific and cannot be more than five business days prior to or 90 d not meet the applicable statutory filing requirements, this date will not b
E V: Effective date is of filing.) the date insequent's effect E VI: Other p	ve date, if other than the listed, the date must he red in this block does ive date on the Departmorovisions, if any. SIGNATURE: Signature of This document is elam aware that any	not meet the applicable statutory filing requirements, this date will not be ment of State's records.