## M14000003852

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	> #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·
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DIYLICH CT CORPORATIONS

DIYLICH ANASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Ritz Capital Management LLC		
(Name of Lim	ited Liability Company)	
	bility Company for Authorization to Transact Business in ibmitted to register the above referenced foreign limited	
Please return all correspondence concerning this m	atter to the following:	
Robert Ritzenthaler		
(Na	me of Person)	
Ritz Capital Managment LLC	<del></del>	
(Fir	m/Company)	
22821 Sills Loop	(Address)	
	(Address)	
	THE A	
Land O Lakes, FL 34639		
(City/St	ate and Zip Code)	
For further information concerning this matter, ple	ase call:	
Robert Ritzenthaler	at ( 201 ) 218-4980	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate	

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Ritz Capital Management LLC (Name of Fo	oreign Limited Liability Company)
Delaware	3.
(Jurisdiction under the law of which foreign li company is organized)	mited liability (FEI number, if applicable)
4-18-2000	5. perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
n/a	
(See sections 608,501	d business in Florida, if prior to registration.) & 608.502 F.S. to determine penalty liability)
22821 Sills Loop	
Land O Lakes, FL 34639	F. T. S
	(Street Address of Principal Office)
If limited liability company is a manage	ger-managed company, check here
The name and usual business addresses	on of the managing manch are an arrangement of the con-
The name and usual business addresse	es of the managing members or managers are as follows:
Robert Ritzenthaler	
22821 Sills Loop	
Land O Lakes, FL 34639	
Attached is an original certificate of existence, n	no more than 90 days old, duly authenticated by the official having custody of recor
	ed. (A photocopy is not acceptable. If the certificate is in a foreign language, a
nslation of the certificate under oath of the transla	
. Nature of business or purposes to be	conducted or promoted in Florida: consulting/management
- A	4/
IM.	
Signature sia men	mber or an authorized representative of a member.
	my or an aminorizate representative or a monitor.
(In accordance with secti	ion 608.408(3), F.S., the execution of this document constitutes penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

٠,

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

I. The name	of the Limited Liability Com	ipany is:	
Ritz Capital Ma	anagement LLC	<u> </u>	
2. The name	and the Florida street address	s of the registered agent and office	e are:
	Robert Ritzenthaler		208
		(Name)	27004 SET
	22821 Sills Loop		P I
	Florida Street Ac	ddress (P.O. Box NOT ACCEPTABLE)	一
	Land O Lakes	FL 34639	3: 28 ORATIC FLORU
		City/State/Zip	DAS DAS

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 608, Florida Statutes.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RITZ CAPITAL MANAGEMENT, LLC" 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 TWENTY-SIXTH DAY OF AUGUST, A.D. 2004.



Darriet Smith Windsor, Secretary of State

AUTHENTICATION: 3318776

DATE: 08-26-04

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