

MA5000001761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800049781048

04/05/05--01062--011 **125.00

FILED
2005 APR - 5 PM 3:02
TALLAHASSEE, FLORIDA
RECEIVED
2005 APR - 5 PM 12:12
TALLAHASSEE, FLORIDA

J. BRYAN APR - 5 2005

CT CORPORATION

April 5, 2005

Department of State, Florida
409 East Gaines Street
Tallahassee FL 32399

FILED
2005 APR -5 PM 3:02
CT CORPORATION
TALLAHASSEE, FLORIDA

Re: Order #: 6335431 SO
Customer Reference 1: LA575-1
Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

Riviera Management, LLC (MN)
Registration
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jennifer Murphy
Fulfillment Specialist
Jennifer_Murphy@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

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

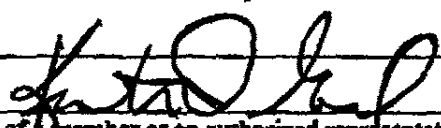
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Riviera Management, LLC
(Name of Foreign Limited Liability Company)
2. Minnesota
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 33-111-1892
(FEI number, if applicable)
4. February 16, 2005
(Date of Organization)
5. perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. February 4, 2005
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. One Shannon Drive
Hastings, Minnesota 55033
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here ☒
9. The name and usual business addresses of the managing members or managers are as follows:

<u>Kenneth Grund</u>	<u>T. Jay Salmen</u>
<u>One Shannon Drive</u>	<u>P.O. Box 16148</u>
<u>Hastings, MN 55033</u>	<u>St. Paul, MN 55116</u>

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: property management


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes
an affirmation under the penalties of perjury that the facts stated herein are true.)

KENNETH D. GRUND
Typed or printed name of signer

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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.

1. The name of the Limited Liability Company is:

Riviera Management, LLC

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

CT Corporation System

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

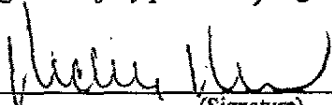
Plantation

FL

33324

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 608, Florida Statutes.


(Signature)

Michele Miller
Assistant Secretary

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

FILED
2005 APR -5 PM 3:02
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

State of Minnesota

SECRETARY OF STATE

FILED
2005 APR -5 PM 3:02
JULIUS CORPORATION'S
TALLAHASSEE, FLORIDA

Certificate of Good Standing

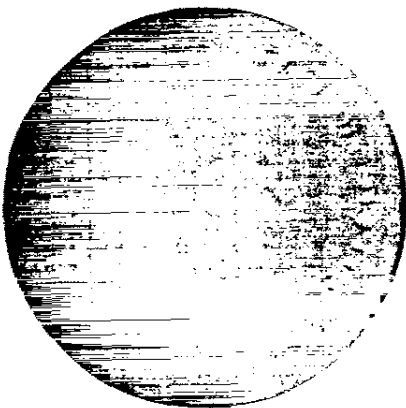
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered to do business by filing an application for a certificate of authority with the Office of the Secretary of State on the date listed below; the limited liability company is governed by Chapter 322B of Minnesota Statutes; and this limited liability company is authorized to do business as a limited liability company at the time this certificate is issued.

Name: Riviera Management, LLC

Date Formed or Registered: February 16, 2005

State of Organization: Minnesota

This certificate has been issued on April 1, 2005.



Mary Kiffmeyer
Secretary of State.