(Re	questor's Nar	me)
(Ad	dress)	
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(Cit	ry/State/Zip/Pl	none#)
PICK-UP	☐ WAIT	MAIL
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TRANSMITTAL LETTER

		IKANS	WILLIAN CELLER	
TO:	Registration Section Division of Corporati	ions		
SUBJ	ECT: Riverview Mana	ger, LLC		
		(Name of Lin	nited Liability Company)	
Florida		ence, and check are s	lability Company for Authorization to Transact Busine submitted to register the above referenced foreign limit	
Please	return all corresponde	ence concerning this	matter to the following:	
		SA	M D. NORTON	
		(N	ame of Person)	
		NORTON, HAMMER	RSLEY, LOPEZ & SKOKOS, P.A.	
	-	(F	irm/Company)	
		1819 MA	IN STREET, SUITE 610	
			(Address)	
		SARASO*	TA, FLORIDA 34236	
	· ·		State and Zip Code)	
For fu	rther information conc	erning this matter, pl	lease call:	
	SAM D. NORTON		at (941) 954-4691	
	(Name	e of Person)	(Area Code & Daytime Telephone Dimbet) Area Code & Daytime Telephone Dimbet Area Code & Daytime Dimbet Are	-71
	STREET ADDRES	S:	MAILING ADDRESS:	
	Registration Section		Registration Section	Ğ
	Division of Corporat		Division of Corporations \square_{\square}	
	409 E. Gaines Street		P.O. Box 6327	
	Tallahassee, Florida		Tallahassee, Florida 32314	
Enclos	sed is a check for the f	ollowing amount:		
	□ \$125.00 Filing Fee	□ \$130.00 Filing Fee & Certificate		

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	WILL LEMELT COME AND TO INVENTED DOMESTED BY THE STATE OF PLONIDA.
1.	Riverview Manager, LLC
	(Name of Foreign Limited Liability Company)
2	Michigan 3 20-3085133
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	June 30, 2005 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to
	exist or "perpetual")
6.	No business transacted prior to registration.
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	640 N. Old Woodward, Suite 302
	Birmingham, Michigan 48009
	(Street Address of Principal Office)
	If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows:
	David C. Rubin, Manager
	640 N. Old Woodward, Suite 302
	Birmingham, Michigan 48009
10	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records:
	e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a forestending age, a
	nslation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: Managing entity for
	Riverview Florida Associates, LLC, a real estate development company.
	Some
	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.)
	Sam D. Norton, authorized representative
	Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

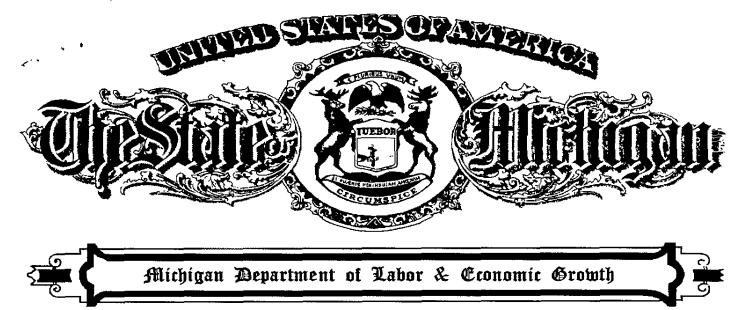
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Riverview Manager, LLC					
2. The name ar	nd the Florida street address of	the registere	d agent and office are:		
	Sam D. Norton		- - , , , , , , ,		
		(Name)			
	1819 Main Street, Suite 610				
	Florida Street Addre	ss (P.O. Box N	OT ACCEPTABLE)		
	Sarasota	. FL	34236		
		City/State/Zi	7		

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)

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



Lansing, Michigan

This is to Certify That

RIVERVIEW MANAGER, LLC

was validly organized on June 30, 2005 as a Limited Liability Company. Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my trand, in the City of Lansing, this 5th day of July 2005

Bureau of Commercial Services

,Director