Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

: (850)617-6383

From:

Account Name

: BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number : 075350000132

Phone

: (305)374-7580

Fax Number

: (305)351-2122,

Attention: Lalaine Landau (Matter 32259)

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

Emeil Address: thekla.salzman Prialtocapital.com

FLORIDA/FOREIGN LIMITED LIABILITY CO. RL RES 2009-1 Investments, LLC

Certificate of Status	1
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FEB - 1 2010

EXAMINER

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

	COMPLIANCE WITH SECTION 608.503, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	e a re)RFICIN
1	RL RES 2009-1 Investments, LLC		
•	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
CO	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy usent of the managers or managing members adopting the alternate name. The alternate name must include "Limited impany," "L.L.C," "LLC.")		
2.	DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)		
Ī	(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)		
4.	JANUARY 28, 2010 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cea		
	(Date of Organization) (Duration: Year limited liability company will cea exist or "perpetual")	se to	
6.	(Date first transacted business in Florida, if prior to registration.)		
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7,	700 N.W. 107 Avenue, Suite 400		
	Miami, FL 33172		a .
	(Street Address of Principal Office)	=	ĭSE
8.	If limited liability company is a manager-managed company, check here	10 JAN	CR
^	The name and a 11 to 12 to 13 to 15	2	ST.
ك .	The name and usual business addresses of the managing members or managers are as follows:	29	27 27 27
	RL RES 2009-1, LLC	_=	200
	700 N.W. 107 Avenue, Suite 400	Ö	Y OF STATI
	Miami, FL 33172		TIONS
læ	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language slation of the certificate under eath of the translator must be submitted.)		- *
i i	Nature of business or purposes to be conducted or promoted in Florida: Any and all busine	ss	
	or purposes permitted to be conducted or promoted under the laws of the State of Flori	da	
	//s// David Schubauer		
	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.)		
	DAVID SCHUBAUER, Authorized Representative		
	Typed or printed name of signee		

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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	18:			
RL RES 2009-1	investm	nents, LLC		
If unavailable, the alternate to be used in the sta	ite of Floric	da is:		
2. The name and the Florida street address of the	ne registere	ed agent and office are:		
C T Corporation System (Name)				
1200 South	Pine Islan	nd Road		
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
Plantation	FL	33324		
	City/State/Zij	р		

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.

CT Corporation System

(Cimpture)

Madonna Cuddihy Special Assistant Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

S 5.00 Certificate of Status (optional)

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FAX:3053747593

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RL RES 2009-1 INVESTMENTS, 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-EIGHTH DAY OF JANUARY, A.D.

2010.

4782350 8300

100082896

You may verify this certificate online at corp. delawers.gov/suthver.shtml

AUTHENT CATION: 7785068

DATE: 01-28-10