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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER -

Name of Limited Liability Company

TO:

Registration Section Division of Corporations

Riverstone Financial V, LLC

| lease return all corr | espondence c | oncerning this ma | tter to the f | ollowing: | | |
|-----------------------|--------------|---|--|------------------------------------|-------|--|
| S | abeta | y Palatcl | าi | | | |
| | <u> </u> | | Nar | ne of Person | | |
| R | iverst | one Fina | ncial | V, LLC | | |
| | | | Fin | n/Company | | |
| 9 | 01 N N | /Jarket S | treet | Suite 46 | 3 | |
| | | | | Address | | |
| V | /ilming | gton, DE | 1980 |)1 | | |
| | | | City/Sta | te and Zip Code | | |
| CC | ontacto | @riverst | onefi | nancialll | c.coi | m |
| | <u> </u> | | | for future annual rep | | |
| or further informati | on concernin | g this matter, pleas | se call: | | | |
| Sabe | tay Pa | alatchi | | 302 | 268 | 3-6112 |
| | Name o | f Contact Person | | Area Code | Da | ytime Telephone Number |
| | 327 | | Division Registrat Clifton E 2661 Exc | ecutive Center Cire | ele | |
| | | | 2661 Ex | • | ele | |
| Enclosed is a che | | ollowing amou ☐ \$130.00 Filin Certificate of | g Fee & | □ \$155.00 Filing Certified Cop | | ■ \$160.00 Filing Fee, Certificat of Status & Certified Copy |

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| FOREIGN LIMITED LIABILITY COMPANY I | TO TRANSACT BUSINESS IN THE STAT | TE OF FLORIDA: |
|--|--|---|
| I. Riverstone Financial V, LLC. | • | • |
| (Name of Foreign Limited Liability Co. | mpany; must include "Limited Liability Compa | ny," "L.L.C.," or "LLC.") |
| Riverstone Lending, LLC. | | |
| (If name unavailable, enter alternate name adopted for Liability Company," "L.L.C," or "LLC,") | or the purpose of transacting business in Florida. | . The alternate name must include "Limited |
| _{2.} Delaware | _{3.} 46-5565525 | |
| (Jurisdiction under the law of which foreign limited company is organized) | | number, if applicable) |
| 4. Will begin transacting busin | · - | _ |
| (Date first trans (See sections 605. | sacted business in Florida, if prior to registration 0904 & 605.0905, F.S. to determine penalty lial | n.) bility) |
| 5. 901 N Market Street, Su | uite 463 | |
| Wilmington, DE 19801 | | |
| | (Street Address of Principal Office) | |
| 6. 901 N Market Street, Su | ite 463 | |
| Wilmington, DE 19801 | | |
| | (Mailing Address) | |
| 7. The name, title or capacity and address | ess of the person(s) who has/have at | uthority to manage is/are |
| Sabetay Palatchi, Member | r / President | |
| 901 N Market Street Suite | 463 | 1777 - 1788 - 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
| Wilmington, DE 19801 | | 97 97 0910 |
| 8. Attached is an original certificate of e having custody of records in the jurisdic acceptable. If the certificate is in a foreig must be submitted) | tion under the law of which it is org | ganized. (A photocopy is not |
| | | |
| (In accordance with section 605.0203, F.S., the execution of am aware that any false information submitted in a document | | |
| Sabetay Pa | alatchi | |

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| | e, the alternate to be used in one Lending, LL | | |
|---------------------------------|---|---|--|
| 2. The name | and the Florida street addre | ess of the registered agent and office are | 2; |
| | Corporation S | Service Company | |
| | | (Name) | - |
| | 1201 Hays St | reet | A. |
| | Florida Street | Address (P.O. Box NOT ACCEPTABLE) | To p |
| | Tallahassee | 32301 | |
| | | City/State/Zip | |
| registered ag statutes relat | tent and agree to act in this c ing to the proper and complo oligations of my position as r | and to accept service of process for the a in this certificate, I hereby accept the ap- capacity. I further agree to comply with ete performance of my duties, and I am f egistered agent as provided for in Chap | the provisions of alb familiar with and |

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

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "RIVERSTONE FINANCIAL V, 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 FOURTEENTH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RIVERSTONE FINANCIAL V, LLC" WAS FORMED ON THE ELEVENTH DAY OF APRIL, A.D. 2014.

TALLANASSES STORING

5515406 8300

140602998

AUTHENTY CATION: 1370873

DATE: 05-14-14

You may verify this certificate online at corp.delaware.gov/authver.shtml