# 111/1000006689

(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:
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2814 SEP - 8 - 8H 10x 00

Dear State of Florida,

RSL LLC, a Delaware Limited Liability Company, is filing to do business in the state of Florida. Please find enclosed executed filing form, articles of organization, and check.

Thank you.

Ricardo Lachman

Rich Jule

Principal, RSL LLC

(954) 471-7969

2814 SEP -8 AH KB 00

### **COVER LETTER**

	stration Section sion of Corporations			
SUBJECT:	RSL LLC			
SODJIK	Name	of Limited Liability Company		renamen or n
	"Application by Foreign Limited Liab I check are submitted to register the ab			
Please return a	all correspondence concerning this ma	tter to the following:		
	Ricardo Lachma	an		
		Name of Person		
	RSL LLC			2
		Firm/Company	7-2 / 3 30 kg	<u></u>
	2400 E Comme	rcial Blvd Ste 8	328	Paner
		Address	in the	>- II
Fort Lauderdale, FL 33308				
		City/State and Zip Code		00
	lachman@quan	tsoftadvisers.co	om	
	E-mail address:	(to be used for future annual report r	notification)	<del></del>
For further info	ormation concerning this matter, pleas	e call:		
Ri	cardo Lachman	<sub>31</sub> ,954 ,4	71-7969	
	Name of Contact Person	Area Code	Daytime Telephone Number	
Divis Regis P.O. I	LING ADDRESS: sion of Corporations stration Section Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	a check for the following amou 25.00 Filing Fee S130.00 Filing Certificate of	g Fee & 🔲 \$155.00 Filing Fee	e & <b>I</b> \$160.00 Filing Fee of Status & Certifi	

## 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:

RSL LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," SL FL, LLC	"L.L.C.," or "LLC.")
name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The	e alternate name must include "Limito
bility Company," "L.L.C," or "LLC.")	
Delaware 3. 37-1762965	
Jurisdiction under the law of which foreign limited liability (FEI numb company is organized)	er, if applicable)
N/A	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability	y);
2400 E Commercial Blvd Ste 828	
Fort Lauderdale, FL 33308	T R T
(Street Address of Principal Office)	60 mg (co )
Same as above	
•	
(Mailing Address)	
The name, title or capacity and address of the person(s) who has/have authoricardo Lachman, Principal	ority to manage is/are:
Attached is an original certificate of existence, no more than 90 days old, dulying custody of records in the jurisdiction under the law of which it is organiceptable. If the certificate is in a foreign language, a translation of the certificate be submitted)	zed. (A photocopy is not
Signature of an authorized person	

am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 8.817.155, F.S.)

Ricardo Lachman

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.

1. The name of the Limited Liability Company is:			
RSL LLC			
If unavailable, the alternate to be used in the state of Florida is:  RSL FL, LLC			
2. The name and the Florida street address of the registered agent and office are:		ZEÍN SEP	
Ricardo Lachman			\$
2400 E Commercial Blvd Ste 828		CO	; ;
		00 CH HA	(
Florida Street Address (P.O. Box NOT ACCEPTABLE)	* (*)	00	
Fort Lauderdale 33308			
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 605, 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)

## Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF FORMATION OF "RSL LLC", FILED IN THIS

OFFICE ON THE TWENTY-SEVENTH DAY OF JUNE, A.D. 2014, AT 5:03

O'CLOCK P.M.

5560130 8100

140896277
You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTICATION: 1498373

DATE: 06-30-14

State of Delaware Secretary of State Division of Corporations Delivered 05:07 PM 06/27/2014 FILLU 05:03 PM 06/27/2014 SRV 140896277 - 5560130 FILE

### CERTIFICATE OF FORMATION

OF

#### **RSL LLC**

The undersigned, an authorized natural person, for the purpose of forming a limited liability company under the provisions and subject to the requirements of the Delaware Limited Liability Company Act (6 Del. C. §18-101 et seq.), hereby certifies that:

FIRST:

The name of the Limited Liability Company is: RSL LLC

(the "Company").

SECOND:

The Company's registered office in the State of Delaware is: 3500 South

DuPont Highway, Dover, Delaware 19901, County of Kent.

THIRD:

The name and address of the registered agent of the Company for service

of process is: Stellar Corporate Services LLC, 3500 South DuPont

Highway, Dover, Delaware 19901, County of Kent.

IN WITNESS WHEREOF, the undersigned, has duly executed this Certificate of Formation as of this 2 day of June, 2014.

Name: Ricardo Lachman Title: Authorized Person

(00045690.DOC)