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2015 APR 20 AM 10: 42

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K.SALY EXAMINER APR 21 2015 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 594355 4803460

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE : April 17, 2015

ORDER TIME : 5:56 PM

ORDER NO. : 594355-020

CUSTOMER NO: 4803460

FOREIGN FILINGS

NAME: RAIA FL SPE GROUP III, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER:

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:

1. KAI	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	(Name of Foreign Entitled Elability Company, mass include Elabolity Company, 1820.)
	anavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Company," "L.L.C," or "LLC.")
₂ Del	aware 3.
(Jurisd:	iction under the law of which foreign limited liability any is organized) (FEI number, if applicable)
4. Up	oon filing
	(Date first transacted business in Florida. if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5 50	0 North Franklin Turnpike, Ramsey, New Jersey 07446 🚬 💆
J	
	(Street Address of Principal Office)
6. 500	0 North Franklin Turnpike, Ramsey, New Jersey 07446
	(Mailing Address)
7. The	name, title or capacity and address of the person(s) who has/have authority to manage is/are:
	sset Management, LLC, Manager, 500 North Franklin Turnpike, Ramsey, New Jersey 07446
	Soci Management, 220, Manager, 200 North Familian Familia, Familia
	ched is an original certificate of existence, no more than 90 days old, duly authenticated by the official
_	custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not ble. If the certificate is in a foreign language, a translation of the certificate under oath of the translator
	e submitted)
	/S/ Samuel A. Raia
	Signature of an authorized person
	ince with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true had any false information submitted in a document to the Department of State constitutes a third degree fellow as provided for in \$ 817.155, F.S.)

Samuel A. Raia, Authorized Person

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 o	f the Limited Liability	Company is:	
RAIA FL SPE G	iroup III, LLC		
If unavailable,	the alternate to be used	I in the state of Florida is:	
2. The name a	nd the Florida street ad	dress of the registered agent and office are:	285 APR 20
	Corporation Service Co	ompany	P. 72
		(Name)	- 55 PG 17
	1201 Hays Street		高景 王 一
	Florida Str	reet Address (P.O. Box NOT ACCEPTABLE)	一部また
	Tallahassee	32301 FL	#T
		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.

Corporation Service Company

By: Stephanie Milnes
Asst. Vice President
(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 "RAIA FL SPE GROUP III, 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 SEVENTEENTH DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RAIA FL SPE GROUP III, LLC" WAS FORMED ON THE SIXTEENTH DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5730017 8300

150528703

AUTHENTY CATION: 2301710

DATE: 04-17-15

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