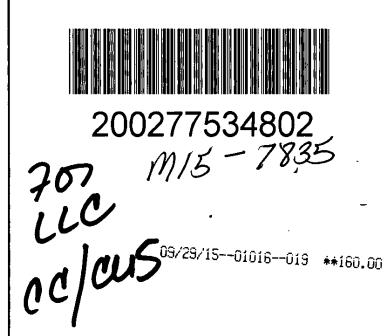
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
<u></u>	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



OCT -1 2015 N. CAUSSEAUX

COVER LETTER

TO:

т п	RVX ASSET MANAGEMENT LLC	
ВЈЕ	Name of Limited Liability Company	
	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cert e, and check are submitted to register the above referenced foreign limited liability company to transact business i	
ase r	eturn all correspondence concerning this matter to the following:	
	JACQUELINE WALKER	
	Name of Person	
	RVX ASSET MANAGEMENT LLC	
	Firm/Company	
	20900 NE 30TH STREET # 401	
	Address	
	AVENTURA, FLORIDA 33180	
	City/State and Zip Code	
	JWALKER@RVX-AM.COM	
	E-mail address: (to be used for future annual report notification)	
r furt	er information concerning this matter, please call:	
	JACQUELINE WALKER 305 363-6894	
	Name of Contact Person Area Code Daytime Telephone Number	
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	
close	l is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certified Copy Certificate of Status Certified Copy of Status & Certified Copy	icate

IN FLORIDA

	THON 6050902, FLORIDA STATUTES, T USINESS IN THE STATE OF FLORIDA:	THE FOLLOWING IS SUB	MITTED TO REGISTER A	FOREIGN LIMITED LIABILITY
RVX ASSET MANAG				
1	eign Limited Liability Company; must	include "Limited Liability	y Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter all Liability Company," "L.L.C.,	ternate name adopted for the purpose of "LLC.")	of transacting business in	Florida. The alternate nan	ne must include "Limited
DELAWARE	5. Bisc. ,	47-4633365		
2. (Jurisdiction under the law	of which foreign limited liability	3.	FEI number, if applicable)	
company is organized)				
4	(Date first transacted business	s in Florida, if prior to reg	istration.)	
20900 NE 30TH STRI	(See sections 605,0904 & 605.09	905, F.S. to determine per	nalty liability)	_
AVENTURA, FLORII	AFF SS T			
	(Street Address of Pr	incipal Office)		PAR 9
6				ASS
				mo z m
	(Mailing Ac	ddress)		AN O: 2
7. Name and street addres	ss of Florida registered agent: (P.O). Box NOT acceptable	9)	92 21 21
	JACQUELINE WALKER	<u> </u>	,	DE A
Name:	20000 NE 200H CTREET			
Office Address:	20900 NE 30TH STREET	1 11		
	AVENTURA		33180 Florida	
	(City)	, , ,	(Zip code)	_
Registered agent's accep				
designated in this applica to complywith the provision	gistered agent and to accept servic tion, I hereby accept the appointm ons of all statutes relative to the pi my position as registered agent.	ient as registered agen	t and agree to act in the	is capacity. I further agree
	(Register	red agent's signature)		-
8 The name title or cano	acity and address of the person(s) w	uho has/have authority t	o managa islara:	
RAYMOND ZUCARO -	• •	viio itas/itave autilority i	o manage is/are.	
18935 SW 29 STREET, N	MIRAMAR, FLORIDA 33029			
	12/5	tificate is in a foreign la		
	Signature of	f an authorized person		
	I in accordance with section 605.02 the Department of State constitute	es a third degree felony		
	RAY MUND ZUC Typed or pri	c 170		_
	Typed or pri	nted name of signee		

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RVX ASSET MANAGEMENT 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-FIFTH DAY OF SEPTEMBER, A.D. 2015.

FILED 15 SEP 29 AN ID: 27 SELIKETARY OF STATE AND AN ASSEE, FLORIDA



Authentication: 10129166

Date: 09-25-15