Division of Corporations Electronic Filing Cover Sheet

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(((H16000188555 3)))



H160001885553ABC8

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name :

: INCORP SERVICES INC

Account Number: I20120000007

: (702)866-2500

Phone Fax Number

: (702)866-2689

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

Email Address: documents cincorp. com

322 相9:5

#### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RVR MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY EXAMINER

AUG 23

8/3/2016

### **COVER LETTER**

416000 188555 3

Registration Section
Division of Corporations TO:

SUBJECT:	RVR Management, LLC			•
50502011	Name of Foreign	Limited Liabil	ity Comp	any
Dear Sir or N	Madam:			
The enclosed	d application, certificate and fee(s) ar	e submitted for	r filing.	
Please return	all correspondence concerning this	matter to the fo	ollowing:	
Erin Rega	n.			
	Name of Person			
inCorp Se	rvices, Inc.			
	Firm/Company			
3773 How	ard Hughes Pkwy, Suite 500S			
	Address			·
Las Vegas	s, NV 89169-6014			
	City/State and Zip Code			•
documents	s@incorp.com			
E-mail add	dress: (to be used for future annual re	port notification	on)	
For further i	nformation concerning this matter, pl	lease call:		
	n for InCorn Services Inc	it ( 702 )	866-25	500
<del></del>	Name of Person		& Daytim	e Telephone Number
Regi Divi Clift 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301		Registra Division P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, Florida 32314
\$25 Filing	Certificate of Status	S55 Filing Certified		S60 Filing Fee, Certificate of Status & Certified Copy
CR2E055 (9/15)	)	2	141	40601885553

MIW000180033 5

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### SECTION I (1-4 must be completed)

inter new principal office address, if applicab	ole:
<u>Principal office address</u> MUST BE A STREET ADDRESS)	ole:
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	
2. The Florida document number of this limite	ed liability company is: M16000005723
3. Jurisdiction of its organization: Delawa	are
Date authorized to do business in Florida:	07/18/2016
SECTION II (5-9 complete only the applica	
. New name of the limited liability company	RVRH Management, LLC (must contain "Limited Liability Company, " "L.L.C.," or "LLC.")
If name unavailable, enter alternate name add	opted for the purpose of transacting business in Florida and attach a managing members adopting the alternate name. The alternate na L.L.C." or "LLC.")
If name unavailable, enter alternate name add copy of the written consent of the managers of must contain "Limited Liability Company," "I	r managing members adopting the alternate name. The alternate na L.L.C." or "LLC.")  istered officer address on our records, enter the name of the new
If name unavailable, enter alternate name additions of the written consent of the managers of the managers of the managers of the managers of the contain "Limited Liability Company," "I be a second of the contain the registered agent and/or the new registered of t	in managing members adopting the alternate name. The alternate na L.L.C." or "LLC.")  istered officer address on our records, enter the name of the new ice address here;
If name unavailable, enter alternate name add topy of the written consent of the managers of must contain "Limited Liability Company," "I	r managing members adopting the alternate name. The alternate na L.L.C." or "LLC.")  istered officer address on our records, enter the name of the new ice address here;
If name unavailable, enter alternate name additions of the written consent of the managers of the written consent of the managers of the written contain "Limited Liability Company," "I be a second of the liability Company, "I be a second of the liability Company," "I be a second of the liability Company, "I be a second of the liabili	in managing members adopting the alternate name. The alternate na L.L.C." or "LLC.")  istered officer address on our records, enter the name of the new ice address here;

If Changing Registered Agent, Signature of New Registered Agent

tle/Capacity	Name	Address	Type of Action
			Add
			Remove
<del>-</del> -	· · · · · · · · · · · · · · · · · · ·		Addy Section
			Remove 2
			Remove
<del></del>	<u> </u>		Add
			Remove
<del></del> -			Add
			Remove
forementioned	artificate, if required: no more than 90 d amendment(s), duly authenticated by t er the law of which this entity is organi	he official having custody of records in the	

Filing Fee: \$25.00

HILO001885553

# <u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "RVR MANAGEMENT, LLC",

FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "RVRH

MANAGEMENT, LLC" ON THE THIRD DAY OF AUGUST, A.D. 2016, AT 2:08

O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RVRE MANAGEMENT, LLC" WAS FORMED ON THE THIRTEENTH DAY OF JULY, A.D. 2016.



6095578 8320 SR# 20165447347

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

TILED FERRETARY OF STAIL AND STAIL A

Authentication: 202860716

Date: 08-19-16

H16000188555 3



August 16, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RVR MANAGEMENT, LLC ONE TOWN CENTER RD, STE 675 BOCA RATON, FL 33486

SUBJECT: RVR MANAGEMENT, ITIG

\* corrected \*

REF: M16000005723

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A desired case or a fortunate of a data into the avoidencing the amendment investible submitted with the application. The certificate should be submitted as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please westurn your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II FAX Aud. #: H16000188555 Letter Number: 816A00017282

P.O BOX 6327 - Tallahassee, Florida 32314

