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Account Number : 103731001374

Phone : (407)418-2435 Sax Number : (407)420-5909

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Foreign Limited Liability Company The RVX Centre Funds, LLC

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IN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 015/0202, FLORIDA STATUTEN, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN	LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS BY THE STATE OF 11 ORDA	

The RVX Centre Fund							
(Name of Force	eign Limited Liability Company; must i	nclude Limited Link	ility Company, L.L.C.	or "LLC")	, and the second second	translating	
(If name unavailable, enter a Liability Company," "L.L.C.	Hernate name adopted for the purpose o	Cumsacting business	s in Flotida. The alternate n	ame must i	nclude :	Limited	
2. Delaware		Applied for					
(Jurisdiction under the law company is organized)	of which foreign limited liability	.,	(FEI number, if applicable)				
Union montificacións							
4. Open quanteacon	(Date first transacted business (See sections 605,0904 & 605,09	in Florida, il prior to	registration)	Present			
5. 20900 N.E. 30th Ave		US, F.S. In determine	penally hability)				
Aventura, PL 33180							
·	(Street Address of Prin	ncipul Office)					
6 20900 N.E. 30th Ave., 8	Suite 401						
Aventura, FL 33180					©17		يعمد
Avenda. 1 E 55170	(Mailing Add	dress)				ì	
7 November Land	as of Florida registered agent: (P.O.		41.3		نست	e mangers	
). Name and <u>street addres</u>	ss of Fiorida registered agent: (r.o. Jacqueline Walker	toox tilot accenta	ioie)		-	يعوده	
Name:	<u> </u>			- 1 - 1		€ξ guæng	
Office Address:	20900 N.E 30th Ave., Soite 401			-0 -03	9.	And the stand	
	Avenura		Florida 33180	365	64		
	(City)	——————————————————————————————————————	, Florida 33180 (Zip code)	>×			
designated in this applica to complywith the provisi	gistered agent and to accept vervion tion, I hereby accept the appointme ons of all statutes relative to the pro my position as registered agent.	ent as registered ag oper and complete	ent and agree to act in i	his capac	iŋ. If	urther a	gree
	(Registere	ed agent's signature.					
R. The name, title or caps	scity and address of the person(s) w	ho has/have authori	ry to manage is are:				
RVX Asset Management,	LLC, Managing Member						
20900 N.E. 30th Ave., Sui	ic 401						
Aventura, FL 33180					_		
9. Attached is a certificate jurisdiction under the law of the translator must be st		ificate is in a foreig	n language, a translation	g custody of the cen	of reco	ords in th under oa	e ith
	` \\ W	an authorized person					
	Signatule of	an authorized person	······································				
This document is executed submitted in a document to	I in accordance with section 605 020 at the Department of State constitutes)3 (1) (b), Florida S sa third degree felo	intutes. Lam aware that a ny as provided for in s.81	ny false in 7.155, P.S	iformat 3	поп	
	Jacqueline Walker, Authorized Re	presentative					

Typed or printed name of signee

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "THE RVX CENTRE FUNDS, 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 SIXTEENTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "THE RVX CENTRE FUNDS, LLC" IS A SERIES LIMITED LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE RVX CENTRE FUNDS, LLC" WAS FORMED ON THE FIFTEENTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

 $:_{\mathbf{A}}\chi$

6.5

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