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(Requestor's Name) (Address)	
(Address)	100305626061
(City/State/Zip/Phone #)	11/15/1701023022 **130.00
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(Business Entity Name) (Document Number)	Ž MOV 20
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
USE Only	

NOV 2 0 2017 Y SULKER



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 16, 2017

PETER C JORDAN 360 CENTRAL AVENUE STE 1220 ST PETERSBURG, FL 33701

SUBJECT: RCH/KCP 2017 FUND H, LLC Ref. Number: W17000091753

We have received your document for RCH/KCP 2017 FUND H, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return 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

Letter Number: 717A00023300



COVER LETTER

TO: Registration Section Division of Corporations

RCH/KCP 2017 Fund H, LLC

SUBJECT: _

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Peter C. Jordan

Name of Person

RCH Capital, LLC

Firm/Company

360 Central Avenue, Suite 1220

Address

St. Petersburg, FL 33701

City/State and Zip Code

petejordan@rchcapital.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter C. Jordan		727 at ()	497-404	42	
Name o	f Contact Person	Area Code	Day	time Telephone Number	
MAILING ADDRESS:		5	TREET	ADDRESS:	
Division of Corporations		Division of Corporations			
Registration Section		Registration Section			
P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314			2661 Executive Center Circle		
		Tallahassee, FL 32301			
Enclosed is a check for the follow	ring amount:				
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	Fee &	■ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

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:

L RCH/KCP 2017 Fund H, LLC

name unavailable, enter alternate na			
	une adopted for the purpose of transacting business in Fle	orida. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC,")
Delaware	_	3	
(Jurisdiction under the law of wh	ich foreign limited liability company is organized)	(FEI a	number, if applicable}
	(Date first transacted business in Flonda, il prior to (See sections 605 0904 & 605.0905, F.S. to determ	registration) ine penalty liability (
360 Central Ave., Suite			1220
(Street Address of P			
St. Petersburg, FL 337	01	St. Petersburg, FL 3370)
Name and street addres	s of Florida registered agent: (P.O. Boy	x <u>NOT</u> acceptable)	
Name:	Fred S. Razook, Jr.		
Office Address:	360 Central Ave., Suite 1220		
	St. Petersburg	Florida <u>33701</u> 	
egistered agent's accep	(Ciņ.)	(Zig	o code)
esignated in this applica	gistered agent and to accept service of tion. I hereby accept the appointment of ons of all statutes relative to the prope- of our position of registered and the	as registered agent and agree to	act in this capacity. I further a
nd accept the obligation:	Registered agent	()	ی ج د
nd accept the obligation:	Registered agents (Registered agents acity and address of the person(s) who h <u>Name and Address:</u>	asthave authority to manage is/ar <u>Title or Capacity:</u>	Name and Address:
nd accept the obligation:	Registered agents (Registered agents acity and address of the person(s) who h <u>Name and Address:</u> Fred S. Razook, Jr	asthave authority to manage is/ar <u>Title or Capacity:</u> CFO	Name and Address: Peter C. Jordan
ad accept the obligation: . The name, title or capa <u>Title or Capacity:</u>	Registered agents (Registered agents acity and address of the person(s) who h <u>Name and Address:</u>	asthave authority to manage is/ar <u>Title or Capacity:</u> CFO	Name and Address:

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605 0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

to the Department of State constitutes a time degree leiony as provided for in 5.817.1.
Sugnature of an antibority deperson
FRED J. KAZOOKJA
Typed or printed name of signee



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RCH/KCP 2017 FUND H, 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 SIXTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RCH/KCP 2017 FUND H, LLC" WAS FORMED ON THE ELEVENTH DAY OF OCTOBER, A.D. 2017.

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



84 ch, Secretary of State

Authentication: 203518732 Date: 11-06-17

Page 1

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SR# 20176940349 You may verify this certificate online at corp.delaware.gov/authver.shtml