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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

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REFERENCE: 064906 4306193

AUTHORIZATION A

COST LIMIT : (/ \$_125.00

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ORDER DATE : February 9, 2018

ORDER TIME : 12:28 PM

ORDER NO. : 064906-005

CUSTOMER NO: 4306193

FOREIGN FILINGS

NAME: RH4R FUND 1, LLC

XXXX QUALIFICATION (TYPE: LL)

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CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO:		ration Section in of Corporations					
SURIFO		HAR FUND I LLC				_	
	···	*	Name of L	imited Liability Co	ompany		
The encl Existence	losed "A ce, and c	Application by Fore theck are submitted	ign Limited Liability Compa to register the above referen	any for Authorizat aced foreign limite	ion to Transed liability o	sact Business in Florida," Certifica company to transact business in Flo	te ot` orida.
Please re	eturn all	Correspondence co	oncerning this matter to the f	ollowing:			
		SUZANNE M. I	IOFFMAN				
			Na	me of Person	-		
		KATTEN MUC	HIN ROSENMAN LLP				
			Fir	m/Company	-		
		525 W. MONRO	DE STREET, SUITE 1900				
	•			Address			
		CHICAGO, II.	60661-3693				
			City/St	ate and Zip Code			
		bruce@rhg4rent.o					
			E-mail address: (to be used	for future annual	report notil	ication)	
For furt	ther info	ormation concerning	g this matter, please call:				
	Suzar	nne M. Hoffman		312 ar (577-830	6	
		Name o	f Contact Person	Area Code	Dayt	ime Telephone Number	
	Divisi Regist P.O. L	on of Corporations tration Section Box 6327 hassee, FL 32314			Division o Registratio Clifton Bu 2661 Exec		
Enclos		theck for the follow 25.00 Filing Fee	ing amount: \$\sum \text{S130.00 Filing Fee & Certificate of Status}\$	S155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	1

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605.6902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Delaware	une adopted for the purpose of transacting business in		· · · · · · · · · · · · · · · · · · ·
		3. 30-1018661	
	nich loreign limited hability company is organized)	. 3. 30.10.1001	(FEI number, if applicable)
	(Date first transacted business in Florida, if pro-	N to registration (
	(See sections 605 0904 & 605 0905; F.S. to det	termine penalty liability)	
300 N. La Salle Street.	Suite 5550	6. 300 N. La Salle S	treet, Suite 5550 (Mailing Address)
rStreet Address of P Chicago, IL 60654	rincipal Office)	Chicago, IL 6065	
Cincago, 112 0003			- E
Name and street addres	ss of Florida registered agent: (P.O. I	Box NOT acceptable)	
Name:	Corporation Service Company		22
15.55	1201 Hays Street		
Office Address:	1207 (14) 0 0 100		1 * ·
ving been named as re ignated in this applica comply with the provise	Tallahassee (Coy) Itance: registered agent and to accept service ation, I hereby accept the appointmentions of all statutes relative to the process of my position as registered agent. By:	nt as registered agent and ag oper and complete performan	ed limited liability company at the ree to act in this capacity. I furth ace of my duties, and I am familia Emily Croft
iving been named as re signated in this applica comply with the provisi d accept the obligation	(City) Stance: rgistered agent and to accept service ution, I hereby accept the appointment ions of all statutes relative to the pro st of my position as registered agent. By: (Registered ag	of process for the above state int as registered agent and ag oper and complete performan Milly College em's suppatore)	ed limited liability company at the ree to act in this capacity. I further of my duties, and I am familia Emily Croft Asst. Vice President
signated in this applica comply with the provis d accept the obligation	(City) Stance: Egistered agent and to accept service stion, I hereby accept the appointmentions of all statutes relative to the pro- try of my position as registered agent. By:	of process for the above state int as registered agent and ag oper and complete performan Milly College em's suppatore)	ed limited liability company at the ree to act in this capacity. I further of my duties, and I am familia Emily Croft Asst. Vice President
iving been named as resignated in this applica comply with the provisi d accept the obligation The name, title or cap	tance: egistered agent and to accept service trion, I hereby accept the appointme, ions of all statutes relative to the pro s of my position as registered agent. By: (Registered ag acity and address of the person(s) wh	of process for the above state int as registered agent and ag oper and complete performan em's signature) o has/have authority to manag Title or Capacity:	ed limited liability company at the ree to act in this capacity. I further the of my duties, and I am familia Emily Croft Asst. Vice Presidence is fare:
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Typed or printed name of signer

Page 1



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

DELAWARE, DO HEREBY CERTIFY "RH4R FUND 1 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 NINTH DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RH4R FUND 1 LLC"

WAS FORMED ON THE TWENTY-SIXTH DAY OF DECEMBER, A.D. 2017.

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

Authentication: 202122221

Date: 02-09-18

6680877 8300 SR# 20180864673