

Florida Department of State
Division of Corporations
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Email Address: Lorraine@tartaplaacp.com

Foreign Limited Liability Company
Orlando RIL, LLC

Certificate of Status	0
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February 13, 2019

FLORIDA DEPARTMENT OF STATE

KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES
Division of Corporations

SUBJECT: ORLANDO RIL, LLC

REF: W19000014181

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.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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) 245-6050.

Valerie Herring
Regulatory Specialist III

FAX Aud. #: H19000049738
Letter Number: 919A00003086

P.O. BOX 6327 - Tallahassee, Florida 32314

Fax Audit No.: H19000049738 3

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA.*

1. CJK Associates LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Orlando RIL, LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. Connecticut
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 06 14 9 3639
(FEI number, if applicable)
4. Upon qualification
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 905.0905, F.S. to determine penalty liability)
5. 477 Main Street, Suite 212
Monroe, CT 06468
(Street Address of Principal Office)
6. 477 Main Street, Suite 212
Monroe, CT 06468
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Lorraine Tartaglia, 477 Main Street, Suite 212, Monroe, CT 06468 (MGR)
Remo Tartaglia, 477 Main Street, Suite 212, Monroe, CT 06468 (MGR)
Isabel Tartaglia, 477 Main Street, Suite 212, Monroe, CT 06468 (MGR)
8. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)


Signature of Authorized Person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Lorraine Tartaglia
Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902(1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED AGENT OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

CJK Associates LLC

If unavailable, the alternate to be used in the state of Florida is:

Orlando RIL, LLC

2. The name and the Florida street address of the registered agent and office are:

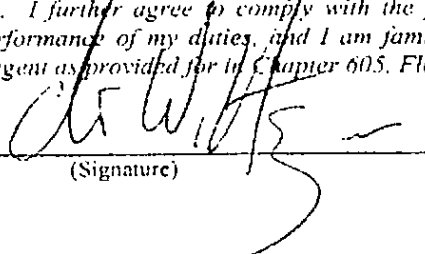
Killgore, Pearlman, Semanie, Denius & Squires, P.A.
(Name)

2 South Orange Avenue, 5th Floor
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Orlando, Florida 32801
City/State/Zip

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.


(Signature)

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Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that articles of organization for

CJK ASSOCIATES LLC

a domestic limited liability company, were filed in this office on May 05, 1997.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such
limited liability company is in existence.



Secretary of the State

Date Issued: January 31, 2019

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA