

M19000004552

Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : MRAI SERVICES, LLC
Account Number : 120080000104
Phone : (302) 674-4089
Fax Number : (302) 674-5286

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

Email Address: jamie@summit-communities.comForeign Limited Liability Company
Riverview MHRV LLC

Certificate of Status	0
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Corporate Filing Menu

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

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IN COMPLIANCE WITH SECTION 605.02(2), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1. RIVERVIEW MEHR LLC

(Name of Foreign Limited Liability Company must include "Limited Liability Company," "LLC," or "L.L.C.")

2. Delaware

(Jurisdiction under the laws of which foreign limited liability company is organized)

(If Florida, give county)

3. open filing

(Do not check if company is organized under a statute that requires it to be a corporation or a partnership)

4. 302 Knights Run Avenue, Ste. 1108

(Principal office address)

Tampa, FL 336025. 302 Knights Run Avenue, Ste. 1108

(Principal office address)

Tampa, FL 336026. Name and street address of Florida registered agent (P.O. Box NOT acceptable)

Name

NRAI Services, Inc.

Office Address

1200 South Pine Island RoadPlantationFlorida 33324

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By

NRAI Services, Inc.

(Signature of registered agent)

Stephen Walle, Stephanie Wallo
ASSISTANT SECRETARY

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:Name and Address:Title or Capacity:Name and Address:MEMMHC Management Services1111 302 Knights Run Ave.
Ste. 1108 Tampa, FL 33602

(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 605.02(3)(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.

Mark J. Sullivan

H190001511373

(Signature of authorized person)

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Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RIVERVIEW MHRV 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 SECOND DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RIVERVIEW MHRV LLC" WAS FORMED ON THE TWENTIETH DAY OF MARCH, A.D. 2019.

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



7335870 8300

SR# 20193447594

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202750750

Date: 05-02-19

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