

10/17/2019

Division of Corporations

M19000099

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000308322 3)))



H190003083223ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

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

Email Address: _____

**Foreign Limited Liability Company
Riverside Capital, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

10/17/2019 7:13:33 AM

10/17/2019 7:33 PM

Electronic Filing Menu

Corporate Filing Menu

Help

T GLASS

OCT 18 2019

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.

1. Riverside Capital, LLC

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

Berkadia Affordable Tax Credit Solutions LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. New Jersey

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

3. 26-0838758

(FEI number, if applicable)

4. 01/01/2019

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 50 South 16th Street, Suite 2825, Philadelphia, PA 19102

(Street Address of Principal Office)

6. 323 Norristown Road, Suite 300, Ambler, PA 19002

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, 33324, Florida
(City) (Zip code)

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: C T Corporation System

(Registered agent's signature)

Stephanie Boehn
Assistant Secretary

2019 OCT 17 PM 2:33

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized manage (up to six (6) total):

Title or Capacity: Name and Address:

☒ Manager Name: Justin R. Wheeler

☐ Member Address: 323 Norristown Road, Suite 300

☐ Authorized Ambler, PA 19002

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:

☒ Manager Name: Randall L. Jensen

☐ Member Address: 323 Norristown Road, Suite 300

☐ Authorized Ambler, PA 19002

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: John J. O'Donnell

☐ Member Address: P.O. Box 90708

☐ Authorized Camden, NJ 08101

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Joseph F. Purcell

☐ Member Address: P.O. Box 90708

☐ Authorized Camden NJ 08101

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Donna Lisa Zebin

☐ Member Address: 323 Norristown Road

☒ Authorized Suite #300

Person Ambler, PA 19002

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

Donna Lisa Zebin
Signature of an authorized person

Donna Lisa Zebin

Typed or printed name of signer

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

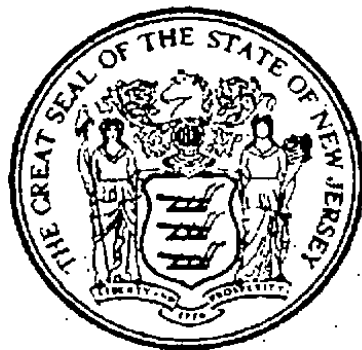
RIVERSIDE CAPITAL, LLC
0600308174

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on September 04, 2007.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

THE CORPORATION TRUST COMPANY
820 BEAR TAVERN ROAD
WEST TRENTON, NJ 08628



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
11th day of October, 2019*

Elizabeth Maher Muoio
State Treasurer

Certificate Number : 6101473703

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSPT/Griff_Cert.jsp

2019 OCT 17 PM 2:33