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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353

Phone

: (800)221-2972 : (718)889-7420

Fax Number

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

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Foreign Limited Liability Company **RSL Prime LLC**

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Corporate Filing Menu

Electronic Filing Menu

01-17 14:43 CST

designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree

Title or Capacity:	N I	Name and Address: Ron Lasorsa	Title or Capacit	_	Name and Add	
Manager ☐Member	Name:	200 E Robinson St. Ste 050	☐ Manager			
	Address:	Orlando, FL 32801	□Member	Address: _	·	
□Authorized			□Authorized			
Person			Person			
□ Other		□Other	□ Other		□ Other	
□Manager	Name:		□Manager	Name:		
□Member	Address:		□Member	Address: _		
□Authorized			☐ Authorized			
Person			Person			<u>-</u>
Other		□Other	Other		Other	
□Manager	Name:		ДМалиger	Name:		£ 117
□Member	Address:		☐ Member	Address: _		,
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Person			Person			*
Other		Other	□Other		Other	
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		in accordance with section 605.02 Department of State constitutes a				nation
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Delaware

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "RSL PRIME 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 SEVENTEENTH DAY OF JANUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RSL PRIME LLC"

WAS FORMED ON THE SIXTEENTH DAY OF JANUARY, A.D. 2020.

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

St. 11 ... 11:12

7803346 8300 SR# 20200371278

Authentication: 202213179

Date: 01-17-20