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S. HAWKES

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	:	I20000000195
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REFERENCE : 629528

AUTHORIZATION : Spelle de ma COST LIMIT : \$\frac{1}{2}5\tau.00

ORDER DATE: April 20, 2022

ORDER TIME: 9:08 AM

ORDER NO. : 629528-020

CUSTOMER NO: 8329413

FOREIGN FILINGS

NAME: RK BELLEVIEW II, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

COVER LETTER

TO:

ct: 🗀	K Belleview II, LLC			
	Nam	e of Limited Liability Company		
		Company for Authorization to Transact Business in Florida." Certif referenced foreign limited liability company to transact business in		
eturn al	correspondence concerning this matter t	o the following:		
	Brian Leonard			
		Name of Person		
	Red Knight Properties			
	^*	Firm/Company		
	53 Spring Valley Road			
	-	Address		
	Morristown, NJ 07960			
	C	ity/State and Zip Code		
	E-mail address: (to be	used for future annual report notification)		
ner info	rmation concerning this matter, please ca	11:		
Brian	Leonard	513 288-7815		
	Name of Contact Person	Area Code Daytime Telephone Number		
Regis	g Address: tration Section	Street Address: Registration Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	ed is a check for the following amount:			

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

IN COMPILANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

RK Belleview II, LLC							
(Name of Foreign	Limited Liability Company; must include "Limited	Liability Compa	my," "L L.C.," or "LLC.")		_		
53	name adopted for the purpose of transacting business in Fl						
	name adopted for the purpose of transacting business in Fl	onda. The alternate	name must include "Lamited Labi	Jity Company," "L L.C," or	"L.L,C" "}		
New Jersey 2	hich foreign limited liability company is organized)	3			_		
(Jurisdiction under the law of w	hich foreign hmited liability company is organized)		(FEI number, if applicable)				
Upon Filing							
4	Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determine	registration) ne penalty liability)		_			
5. (Street Address of Principal Office)		6	failing Address)		_		
53 Spring Valley Road		53 Sp	oring Valley Road				
Morristown, NJ 07960		Morristown, NJ 07960					
-	.			~`	_		
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT accepta	ble)				
Name:	Corporation Service Company			155 50 70			
Office Address:	1201 Hays Street			Fii 3: 2	Sec.		
	Tallahassee		32301 . Florida	28			
	(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.

Corporation Service Company

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Title or Capacity: Name and Address: Name and Address: Name: Anthony Scandariato Name: __ • Manager ■ Manager Address: ____ St Address: _____ □Member □Member Boonton, New Jersey 07005 Morristown, NJ 07960 □ Authorized Authorized Person Person □Other____ □Other_____ □Other_____ □Other___ Name: ____ Red Knight Real Estate Partne □Manager □Manager Name: _____ Address: 53 Spring Valley Road ■ Member □ Member Address: Morristown, NJ 07960 □ Authorized ☐ Authorized Person Person □Other □Other □Other_____ □Other Name: _____ □Manager □Manager Address: □Member ☐ Member Address: □ Authorized ☐ Authorized Person Person □Other___ Other □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. Brian Leonard

Typed or printed name of signee

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY SHORT FORM STANDING

RK BELLEVIEW II, LLC

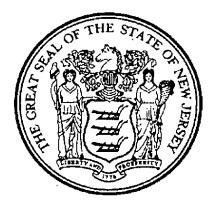
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I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on April 20, 2022.

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 the registered agent and registered office are:

Corporation Service Company Princeton South Corporate Center, Suite 160, 100 Charles Ewing Blvd Ewing, NJ 08628



Certificate Number: 143874988

Verify this certificate online at

https://www.njportal.com/DOR/businessrecords/Validate.uspx

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 21st day of April. 2022

Slup on Mun

Elizabeth Maher Muoio

State Treasurer