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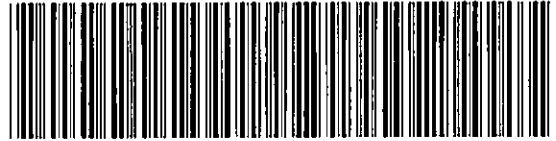
(Business Entity Name)

(Document Number)

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2023 FEB 13 PM 4:24

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** RP HUDSON CAPITAL ADVISORS LIMITED LIABILITY COMPANY

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

RYAN S. CURRAN, CPA, JD

\_\_\_\_\_  
Name of Person

CURRAN & COMPANY LLP

\_\_\_\_\_  
Firm/Company

59 LINCOLN PARK, STE 200

\_\_\_\_\_  
Address

NEWARK, NJ 07102

\_\_\_\_\_  
City/State and Zip Code

OPERATIONS@CURRANLLP.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEIA DENNISON

862

279-7252

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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. RP HUDSON CAPITAL ADVISORS LIMITED LIABILITY COMPANY

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. NEW JERSEY

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

3.

(FEI number, if applicable)

4.

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

350 NE 8TH AVE

5. (Street Address of Principal Office)

DELRAY BEACH, FL, 33483

350 NE 8TH AVE

6. (Mailing Address)

DELRAY BEACH, FL, 33483

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

Name:

ROBERT HUDSON

Office Address:

350 NE 8TH AVE

DELRAY BEACH

(City)

, Florida

33483

(Zip code)

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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.



(Registered agent's signature)

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

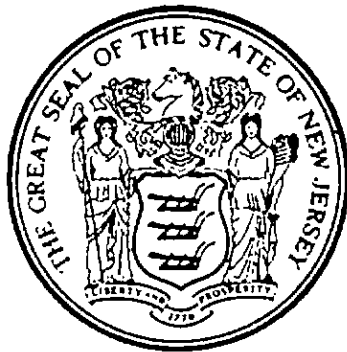
**RP HUDSON CAPITAL ADVISORS LIMITED LIABILITY COMPANY**  
0400550234

*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 February 14, 2013.*

*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:*

ROBERT HUDSON III  
12 WOLFE RUN CT  
LONG VALLEY, NJ 07853



*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
13th day of January, 2023*

Elizabeth Maher Muoio  
State Treasurer

Certificate Number 6139303705

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)

CURRAN & COMPANY LLP  
59 LINCOLN PARK STE 200  
NEWARK NJ 07102-2356

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**USPS CERTIFIED MAIL**



**9407 1118 9876 5837 4787 99**

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Registration Section - Division of Corporations  
The Centre of Tallahassee  
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TALLAHASSEE FL 32303-4112



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