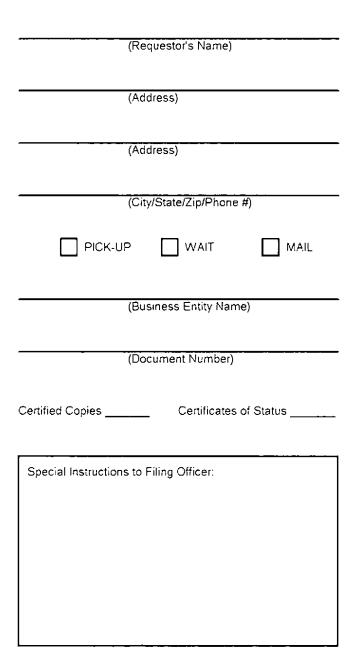
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	.9	COVER LETTER					
	egistration Section ivision of Corporations						
SUBJECT	River Glen LLC						
SUDJECT		e of Limited Liability Company					
The enclos Existence.	ed "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.					
Please retu	rn all correspondence concerning this matter to	o the following:					
	Brendan Feeley						
		Name of Person					
	River Glen LLC						
		Firm/Company					
	14545 S Military Trail J190						
		Address					
	Delray Beach Fl 33484						
	C	ity/State and Zip Code					
	brendan@riverglencocktails.com						
	E-mail address: (to be	used for future annual report notification)					
For further	information concerning this matter, please ca	II:					
В	rendan Feeley	201 2863358 at ( )					
	Name of Contact Person	Area Code Daytime Telephone Number					
	lailing Address: egistration Section	Street Address: Registration Section					
Division of Corporations		Division of Corporations					
P.O. Box 6327		The Centre of Tallahassee					
1	allahassee, F1. 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Pl	nclosed is a check for the following amount: ease make check payable to: FLORIDA DEF l \$125.00 Filing Fee	e & ■ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate					

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

AN COMPLIANCE WITH SECTION 605-0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. River Glen LLC (Same of Foreign	Limited Liability Company, must include "Limite	d Liability Cor	npany," "I. I. C.," or "I.I.C.")	<del></del>
River Glen Cocktails LLC	s.			
t name unavailable, enter alternate	name adopted for the purpose of transacting business in F	lorida. The altern	ate name must include "Limited Liabi	hty Company," "L.L.C," or "LLC")
Delaware  Gursdiction under the law of which foreign limited liability company is organized)		35-2733150 3. (FEI number, (Capplicable)		
03/23/2023				
···	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration ) ine penalty liabil	пу)	_
3553 Pine lake et 5. Street Address of Principal Office)		6	45 s Military Trail (Maling Address)	
Delray beach FL, 33445		Del		
				200
7. Name and <u>street addre</u>	ss of Florida registered agent: (P.O. Box	NOT acce	ptable)	2023 OCT 2023 OCT
Name:	Brendan Feeley			-2 PM
Office Address:	3553 Pine lake et		_	
	Delray Beach		33445 , Florida	
	(Cuy)		(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.

(Registered uggla'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:	Name and Address:	Title or Capacity:		Name and Address:
≖ Manager	Name: Brendan Feeley	□Manager	Name:	
[Member	Address: 2553 Pine Lake Ct	□Member	Address:	
^Authorized	Delray Beach Ft. 33445	□Authorized		
Person		Person		
. Other	Other	□Other		□Other
.T.Manager	Name:	□Manager	Name:	
Member	Address:	□Member	Address:	
Nathorized		□Authorized		
Person		Person		
_Other	□Other	□Other		□ Other
Manager	Name:	□Manager	Name:	
2Member -	Address:	□Member	Address:	
Authorized		□Authorized		<del></del>
Person		Person		18
Cuher	□Other	□Other		□Other

<u>Paportant Notice:</u> 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.

Signatur of an authorized person

<sup>9.</sup> Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the unisdiction 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)

<sup>10.</sup> 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.

Delaware

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "RIVER GLEN 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 OCTOBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RIVER GLEN LLC"

WAS FORMED ON THE TWENTY-THIRD DAY OF MARCH, A.D. 2023.

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



Jeffrey W. Bullock, Secretary of State