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(Requestor	's Name)			
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PICK-UP	WAIT MAIL			
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(Document Number)				
Certified Copies C	Certificates of Status			
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Registration Section

TO:

Div	rision of Corporations		
SUBJECT:	RVOS Management Incentive LLC		
		e of Limited Liability Company	
		Company for Authorization to Transact Business in Florida," Certificate or referenced foreign limited liability company to transact business in Florida	
Please returi	n all correspondence concerning this matter to	o the following:	
	Thomas A. Rizk		
		Name of Person	
	c/o Rizk Ventures		
Firm/Company			
	777 Yamato Road, Suite 105		
	-	Address	
	Boca Raton, FL 33431		
	C	ity/State and Zip Code	
	tom@rizkventures.com		
	E-mail address: (to be	used for future annual report notification)	
For further i	information concerning this matter, please cal	II:	
Ste	ephan K. Pahides, Esquire	215 328-2707 at ()	
	Name of Contact Person	Area Code Daytime Telephone Number	
Re Di P.0	niling Address: egistration Section vision of Corporations O. Box 6327 ellahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Ple	closed is a check for the following amount: ease make check payable to: FLORIDA DEP \$125.00 Filing Fee	e & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate	

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

IN COMPLIANCE WITH SECTION 695.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	centive LLC Limited Liability Company; must include "Limited	Liability	Company,""L. L.C.," or "LLC.")	
name unavailable, enter alternate t	ame adopted for the purpose of transacting business in Flo	onda The	lternate name must include "Limited Liability Company,"	"l.l.C," or "LLC."
Delaware		3.	933078250	
(Jurisdiction under the law of which foreign limited liability company is organized)		J.	(FEI number, if applicable)	
N/A				
	(Date first transacted business in Florida, if prior to a (See sections 605,0904 & 605,0905, F.S. to determine	egistration ne penalty) iability)	
777 W. Yamato Road, Suite 105		6	777 W. Yamato Road, Suite 105	
eet Address of Principal Office)	.	O.	(Mailing Address)	
Boca Raton, FL 33431			Boca Raton, FL 33431	
				2 2
Name and street address	s of Florida registered agent: (P.O. Box	<u>NOT</u> a	cceptable)	1510HU 5
Name:	Corporation Service Company			PH 4: 05
Office Address:	1201 Hays Street			0.50
	Tallahassee		32301 , Florida	
	(Cny)		(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.

Olat.	Charlene Sati / Assistant Secretary		
(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: Thomas A. Rizk Geoffrey Rizk Name: □Manager Name: □ Manager 570 Lexington Ave, Suite 2600 777 W. Yamato Rd, Suite 105 Address: Address: □Member □Member Boca Raton, FL 33431 New York, NY 10022 Authorized Authorized Person Person □Other □Other Other □Other Stephan K. Pahides Name: _____ □Manager □Manager 700 Dresher Road, Suite 150 ☐ Member ☐ Member Address: _____ Horsham, PA 19044 ■ Authorized ☐ Authorized Person Person □Other__ Other____ Other____ Other____ □Manager □Manager Name: Name: □Member ☐ Member Address: ____ Address: _____ □ Authorized ☐ Authorized Person Person Other____ □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. Signature of an authorized person

Typed or printed name of signee

Stephan K. Pahides

Page 1



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

DELAWARE, DO HEREBY CERTIFY "RVOS MANAGEMENT INCENTIVE 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 APRIL, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RVOS MANAGEMENT INCENTIVE LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF AUGUST, A.D. 2023.

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

Authentication: 203276151

Date: 04-17-24