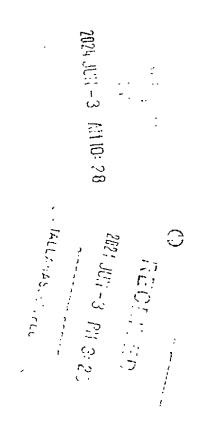
M240000000955

| (Requestor's Name) |
|---|
| (Address) |
| ((daless) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |

Office Use Only



300429638323



JUN 0 4 2024 K. Brumbley



To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 06/03/24 Order #: 1523206-1

Re: Riley Road (Houston) Spv. LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.0 - FL State Account Number:

12000000195

Certificate of Good Standing from State of Incorporation

AUTH

Please take the following action

File in your office on basis $\mathcal C$

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

| | Riley Road (Houston) SPV, LLC | | | | |
|--|--|--|--|--|--|
| SUBJECT | | ne of Limited Liability Company | | | |
| The enclose | ed "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 retui | mall correspondence concerning this matter | to the following: | | | |
| | Bernadette Sostillio | | | | |
| | | Name of Person | | | |
| | Avanti Properties Group | | | | |
| | | Firm/Company | | | |
| | 923 N Pennsylvania Ave. | | | | |
| | | Address | | | |
| | Winter Park, FL 32789 City/State and Zip Code | | | | |
| | | | | | |
| | bsostillio@avantiprop.com | | | | |
| | E-mail address: (to b | e used for future annual report notification) | | | |
| For further | information concerning this matter, please ca | oll: | | | |
| Connie Cummins | | 407 628-8488 | | | |
| | Name of Contact Person | at () | | | |
| Mailing Address: | | Street Address: | | | |
| Registration Section | | Registration Section Division of Corporations | | | |
| Division of Corporations P.O. Box 6327 | | The Centre of Tallahassee | | | |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | |

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. Riley Road (Houston | i) SPV, LLC | | | | |
|---|--|-----------------------------------|--|--------------------------|--|
| (Name of Foreign | Limited Liability Company; must include "Limit | ed Liability | Company, "L.L.C.," or "LLC ") | | |
| | | | | | |
| f name unavailable, enter alternate | name adopted for the purpose of transacting business in l | Florida. The a | hernate name must include "Limited Liability C | ompany," "L.L.C," or "L1 | |
| Delaware | | | 99-3190516 | | |
| (Jurisdiction under the law of which foreign limited liability company is organized | | 3. (FEI number, if applicable) | | | |
| | | | | | |
| 5/22/24 | | | | | |
| · | (Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ | o registration, nine penalty I |) ability) | | |
| 923 N Pennsylvania | Ave | ! | 923 N Pennsylvania Ave | | |
| treet Address of Principal Office) | | 6 | (Mailing Address) | | |
| Winter Park, FL 3278 | | , | Mintor Book El 20700 | | |
| | | Winter Park, FL 32789 | | | |
| | | | | | |
| | | _ | | | |
| | | | | 0 24 JUB | |
| . Name and street addres | ss of Florida registered agent: (P.O. Box | C <u>NOT</u> ac | eceptable) | <u> </u> | |
| | | | | ် ယ | |
| Name: | Corporation Service Company | | | | |
| | | | | | |
| Office Address; | 1201 Hays Street | | | AN 10: 28 | |
| | T 11 1 | | | င်း | |
| | Tallahassee | | 32301 . Florida | | |
| | (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

By: Shauna Godbolt _____

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: Marvin Shapiro | ■Manager | Name: |
| □Member | Address: 923 N Pennsylvania Ave | □Member | Address: 923 N Pennsylvania Ave |
| □Authorized | Winter Park, FL 32789 | □Authorized | Winter Park, FL 32789 |
| Person | | Person | |
| Other | Other | Other | Other |
| ■Manager | Name: | ■Manager | Name:Donald Loeb |
| □Member | Address: 923 N Pennsylvania Ave | □Member | Address: 923 N Pennsylvania Ave |
| □Authorized | Winter Park, FL 32789 | □Authorized | Winter Park, FL 32789 |
| Person | | Person | |
| Other | Other | Other | □Other |
| ≣Manager | Name: Ethan Siller | □Manager | Name: |
| □Member | Address: 923 N Pennsylvania Ave | □Member | Address: |
| □Authorized | Winter Park, FL 32789 | □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. Non-indexed 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 conditions a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Andrew Dubill, Executive Vice President



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

DELAWARE, DO HEREBY CERTIFY "RILEY ROAD (HOUSTON) SPV, 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 THIRTY-FIRST DAY OF MAY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RILEY ROAD

(HOUSTON) SPV, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF APRIL,

A.D. 2024.

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

Authentication: 203600373

Date: 05-31-24