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(Requestor's Name)
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PICK-UP WAIT MAIL
O
(Business Entity Name)
(Document Number)
Certificates of Status
Special Instructions to Filing Officer:
W24-110669

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2024 AUG -6 AH 10: 06

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August 6, 2024

SUNSHINE

SUBJECT: RIVIERA RAMP LLC Ref. Number: W24000110669 CORRECTED

Please Allow For

Same File Date

We have received your document for RIVIERA RAMP LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The money in your account is insufficient to cover the cost of filing this document. Please send additional money to cover this particular filing and other filings you wish to process.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

2024 AUG -8 PH

Letter Number: 524A00017350

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

OATE 08/06/2024	_	**WALK
NTITY NAMERIVIE	RA RAMP, LLC	
OCUMENT NUMBER		
		THE ATTACHED AND RETURN**
	Plain Copy	
XXXXXXXXX	Certified Copy	
	Certificate of Statu	8
	Certified Copy of A Certificate of Good	
	APOSTILLE'/	NOTARIAL CERTIFICATION
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IUMBER OF CERTIFIC	CATES REQUESTED	
TOTAL OWED \$155		ACCOUNT #: 120160000072
		5 8 HM
Please call Tina at		

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:

(Name of Foreign	Limited Liability Company; must include "Limited I	Liability Company," "L.L.C.," or "LEC.")	
f name unavailable, enter alternate (name adopted for the purpose of transacting business in Flori	ida. The alternate name must include "Limited Lia	ability Company," "L.L.C," or "LL
Delaware		99-3080739	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3(FEI number	er, if applicable)
	(Date first transacted business in Florida, if prior to rej (See sections 605 0904 & 605 0905, F.S. to determine	gistration) penalty liability)	
1401 Broad Street		1401 Broad Street	
reet Address of Principal Office)		6. (Mailing Address)	
Clifton, New Jersey 07	013	Clifton, New Jersey 07013	
			- 20
Name and street address	ss of Florida registered agent: (P.O. Box 1	NOT acceptable)	24 AUG
			- 6
Name:	United Corporate Services, Inc.		
	3458 Lakeshore Drive		
Office Address:			06
	Tallahassee	32312 , Florida	
	(City)	(Zin code)	

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.

Michael A. Barr	
(Registered *gent'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: Robert J. Ambrosi	■Manager	Name: Marc A. Perel
□Member	Address: 100 Sunrise Avenue, #522	□Member	Address: 741 S. Lake Avenue
□Authorized	Palm Beach, FL 33480	□Authorized	Delray Beach, FL 33483
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	∐Manager	Name:
□Member	Address:	□Member	Address:
■Authorized	Clifton, NJ 07013	□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	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. 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 constitutes a third degree felony as provided for in s.817.155, F.S.

Jocelyn C. Beckman

Is oes' or printed name of signee



Page 1

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

DELAWARE, DO HEREBY CERTIFY "RIVIERA RAMP 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 FIFTH DAY OF AUGUST, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RIVIERA RAMP LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JUNE, A.D. 2024.

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

Authentication: 204090103

Date: 08-05-24