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Foreign Limited Liability Company RG RIVERLANDS, LLC

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Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRAINING FLORIDA	Ne lore browness
IN COMPLIANCE WITH SECTION KISLINIZ, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREM COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. RG RIVEY O DOC 110.	
(Name of Foreign Limited Enability Company; must include "Limited Liability Company," "L.E.C.," or "LEC." (If name drawallable, enter whereaste name adopted for the purpose of mansacing business in Florida. The observate name must include "Limited Liability Company," or "LEC."	
2. Louisi and a which foreign limite ! hability company is arganized) 3. 39-22893357 (b) I manher, it applicable)	. III.L. er"LLC.")
(Date first transacted business in Florida, if prior to registration.) (See sections 605,0004 & 605,0005, F.S. to determine pointly, highlips)	
5. 106 Ricker Crt 6. 106 Ricker Crt (Street Addiess of Principal Chilice) 6. (Microssyl Address)	
Lattace, LA 70068 Lattace, 1 A 7	08/08-
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	ATT OF SE
Name: Richard Gutierrez	1 B
Office Address: 2840 Sw 129 Avenue	
Mianci (City) Florida 33175	
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited hability comp designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacit to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I amud accept the obligations of my position as registered agent.	any at the place y. I further agree m familiar with
Hachmark Cyclimiter (May Co. 1926 District DT)	

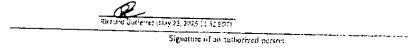
(Registered agent's signature)

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]:

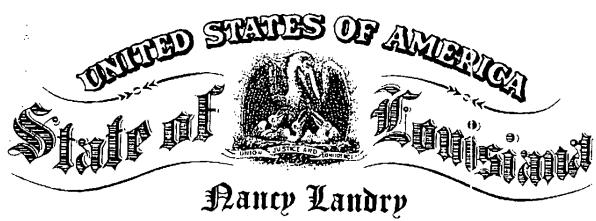
Title or Capacity	Name and Address:	Title or Capacit	.	N
Manager	Name: <u>Bichard Gutierre</u> Z	O Manager		Name and Address:
□ Member	Address: 100 Ricker Crt	DMember		
□ Authorized	LaPlace, LA 700108	DAuthorized		
Person		Person		
□Other	□Other	[]Other		☐ Other
⊡Manager	Name:	□Manager	Name:	
□Member	Address:	⊡ Member		
ClAuthorized		☐ Authorized		
Person		Person		
□Other		□ Other		□Other
□Manager	Name:	□Manager	Namo:	
□ Momber	Address:	□Meniber		
□Authorized		□Authorized		
Person		Person		
□Other	CiOther			Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Monindexed 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 outh 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 \$.317.155, F.S.



Richard Gittierrez



SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

RG RIVERLANDS, LLC

A limited liability company domiciled in LAPLACE, LOUISIANA,

Filed charter and qualified to do business in this State on May 16, 2025,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

May 29, 2025

Secretary of State

Web 4647234



Certificate ID: 12041702#FGG62

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed. www.sos.la.gov