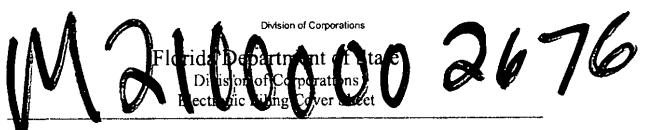
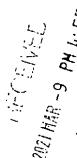
3/9/2021



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

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## Foreign Limited Liability Company Rivers End Gardens Managing Co. GP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
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Help



From: Ranae McGraw

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

IN COMPLIANCE WITH SECTION (05,002, FLORIDA STATUTE), THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

ane unavailable, enter alternate i	name adopted for the purpose of transacting fusions on F	orida. He alternate name must include "Limited Liability Com-	pany," "I.H. C." or "U"	
Delaware		N/A 3.		
(furnal-curs) under the law of which foreign limited liability company is organized)		3. (19) number, if applie.	abic)	
Upon filing				
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & (05 0905, F.S. to determ	registration ) ine penalty (iability)		
999 Waterside Drive, Suite 2300		999 Waterside Drive, Suite 2300 6Mailing Address)		
et Address of Pancipal Officers		(Mailing Address)		
Norfolk, VA 23510		Norfolk, VA 23510		
			,	
Name and <u>street addre</u>	ss of Florida registered agent: (P.O. Bo	: <u>NOT</u> acceptable)	,	
Name and <u>street addre</u>	ss of Florida registered agent: (P.O. Boy	( <u>NOT</u> acceptable)		
Name and <u>street addr<b>e</b>s</u>		: <u>NOT</u> acceptable)		
Name and <u>street addre</u> Name:	SS of Florida registered agent: (P.O. Box C'T Corporation System	x <u>NOT</u> acceptable)		
	C'T Corporation System	: <u>NOT</u> acceptable)		
	C'T Corporation System	x <u>NOT</u> acceptable)		
Name:	C'T Corporation System  1200 South Pine Island Road			
Name:	C'T Corporation System  1200 South Pine Island Road  Plantation			
Name:	C'T Corporation System	x <u>NOT</u> acceptable)	•	
Name:	C'T Corporation System  1200 South Pine Island Road  Plantation			
Name:	C'T Corporation System  1200 South Pine Island Road			
Name: Office Address.	C'T Corporation System  1200 South Pine Island Road  Plantation  (City)	, Florida (Zipcode)		
Name: Office Address. gistered agent's acceptions been named as re-	C'T Corporation System  1200 South Pine Island Road  Plantation  (Cay)  Stance: egistered agent and to accept service of	, Florida	company at the	
Name: Office Address. gistered agent's accerving been named as re	C'T Corporation System  1200 South Pine Island Road  Plantation  (City)  Stance: egistered agent and to accept service of thion, I hereby accept the appointment of	, Florida, Florida	company at the apacity. I furthe	
Name: Office Address. gistered agent's accerving been named as resignated in this applications on the provise comply with the provise.	C'T Corporation System  1200 South Pine Island Road  Plantation  (City)  Itance: egistered agent and to accept service of attion, I hereby accept the appointment attions of all statutes relative to the proper	, Florida	company at the apacity. I furthe	
Name: Office Address. gistered agent's accerving been named as resignated in this applications of the provision with the provisions.	C'T Corporation System  1200 South Pine Island Road  Plantation  (Cay)  Stance:  registered agent and to accept service of attion, I hereby accept the appointment attions of all statutes relative to the property of my position as registered agent.	Florida 33324  Florida (Aspeode)  process for the above stated limited liability is registered agent and agree to act in this corand complete performance of my duties, and	company at the apacity. I furthe	
Name: Office Address. egistered agent's accepaing been named as resignated in this application accept the obligation	C'T Corporation System  1200 South Pine Island Road  Plantation  (City)  Itance: egistered agent and to accept service of attion, I hereby accept the appointment attions of all statutes relative to the proper	, Florida, Florida	company at the apacity. I furthe	

o: 18506176383

Fitle or Capacity:	Name and Address:	Title or Capacit	<u>v:</u>	Name and Address:
□Manager	Name, T. Richard Litton, Jr.	II Manager	Name:	
∃Member	Address: 999 Waterside Dr., Suite 2300	_Member	Address:	
☑Authorized	Norfolk, VA 23510	☐ Authorized		
Person		Person		
□Other		Cother	<u>.</u>	]Other
∐Manager	Name: Carla R. Stoner	□ Manager	Name:	
□Meniber	Address: 999 Waterside Dr., Suite 2300	_Member	Address:	
☑ Authoriz <b>e</b> d	Norrolk, VA 23510	□ Authorized		
Person		Person		
□Other				□Other
				<u>.</u>
∃Manager	Name:	□ Manager	Name:	
□Member	Address:	_Member	Address:	
□Authorized	· · · · · · · · · · · · · · · · · · ·	Authorized		
Person		Person		···
□Other	⊡ Other	()ther	<del> </del>	_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 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 \$.817,155, F.S.

N		
	Signature of an authorized person	
T. Richard Litton, Jr.		
	Typed or pointed name of signee	



Page 1

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

DELAWARE, DO HEREBY CERTIFY "RIVERS END GARDENS MANAGING CO. GP,

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 EIGHTH DAY OF MARCH, A.D. 2021.

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

Authentication: 202675765

Date: 03-08-21