

COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

Office of the Clerk

April 7, 2016

LISA UTTECH CT CORPORATION SYSTEM 4701 COX RD STE 285 GLEN ALLEN, VA 23060

RECEIPT

RE: RCM Family Partners, LLC

ID: T064963 - 4

DCN: 16-03-10-0266

Dear Customer:

This receipt acknowledges payment of \$100.00 to cover the fee for filing an application for a certificate of registration to transact business in Virginia with this office.

The effective date of the registration is April 7, 2016.

If you have any questions, please call (804) 371-9733 or toll-free in Virginia, (866) 722-2551.

Sincerely,

Joel H. Peck

Clerk of the Commission

RECEIPTLC LLNCF CISNJM



3/25 UPS 160310 0266 \$100

Name Availability Done In:

Conflict with ID#:

Clerk's Office State Corporation Commission 1300 E. Main Street Richmond, Virginia 23219

Please file the attached documents.

Special Instructions:

Please hold documents for pickup.

If there are any problems with the filing, please call us at (804) 217-7255.

Thank you,

Qisa Uttech

Lisa Uttech
CT Corporation System
Richmond Fulfillment Office

SCC-CLERK'S OFFICE INFORMATION DESK

COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

AT RICHMOND, APRIL 7, 2016

The State Corporation Commission has found the accompanying application for a certificate of registration to transact business in Virginia submitted on behalf of

RCM Family Partners, LLC

to comply with the requirements of law, and confirms payment of all required fees. Therefore, it is ORDERED that this

CERTIFICATE OF REGISTRATION TO TRANSACT BUSINESS IN VIRGINIA

be issued and admitted to record with the application in the Office of the Clerk of the Commission, effective April 7, 2016.

STATE CORPORATION COMMISSION

By Jan Care

James C. Dimitri Commissioner



LLC-1052 (06/15)

COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

APPLICATION FOR A CERTIFICATE OF REGISTRATION TO TRANSACT BUSINESS IN VIRGINIA AS A FOREIGN LIMITED LIABILITY COMPANY

REVIEW THE INSTRUCTIONS BEFORE SUBMITTING THIS FORM.

LLC name:RCI	M Family Partners, LLC		
Designated name (if required):			
State or other jurisdiction of organization:	Florida		
Date of formation: March 8, 2016	Period of duration:	Perpetu	al
(Mark if applicable:) ☐ The LLC was previously author business entity. (See Instructions.) Set forth additional in		business in Vir	ginia as a foreign
The post office address, including the street and number		ce is	
8460 S.W. 142nd Street	Palmetto Bay	FL	33158-1053
(number/street)	(city or town)	(state)	(zip)
The LLC's registered agent in VIRGINIA is	C T Corporation	System F	204909-1
The registered agent is (mark appropriate box):			
(1) an INDIVIDUAL who is a resident of Virginia and	<u>d</u>		
a member or manager of the LLC. a member or manager of a limited liability of an officer or director of a corporation that is a general partner of a general or limited part a trustee of a trust that is a member or manager of the Virginia State Bar. OR (2) a domestic or foreign stock or nonstock corporation.	a member or manager of the tnership that is a member or rager of the LLC.	LLC. nanager of the	LLC.
limited liability partnership authorized to to The LLC's VIRGINIA registered office address, includ business office of the registered agent, is	•	any, which is ide	entical to the
4701 Cox Road, Suite 285	Glen Allen	, VA	23060
(number/street)	(city or town)	, vA	(zip)
which is physically located in the 🖸 county or 🔲 city	of Henric	00	
The Clerk of the Commission is hereby irrevocably ap service of process if (i) the company fails to maintain the Code of Virginia, (ii) the registered agent's authori (iv) the registered agent cannot be found or served with	ppointed as the agent of the lir a registered agent in Virginia ity has been revoked, (iii) the	as required by { registered agen	§ 13.1-1015 of
The LLC affirms that it is a "foreign limited liability comp	pany" as defined in § 13.1-1002	2 of the Code of	Virginia.
Signed in the name of the foreign limited liability comp	any by:		
If free	March 8, 2016		
(signature)	(date)	(telephone numb	per (optional))
Robert Messa	Manager	•	
(printed name)	(title) (see Instructions	for acceptable tit	les)
☑ The person signing above has been delegated the	e right and power to manage t	he LLC's busin	ess and affairs.





Department of State

I certify the attached is a true and correct copy of the Articles of Organization of RCM FAMILY PARTNERS, LLC, a limited liability company organized under the laws of the state of Florida, filed on March 8, 2016, as shown by the records of this office.

I further certify the document was electronically received under FAX audit number R16000059675. This certificate is issued in accordance with section 15.16, Florida Statutes, and authenticated by the code noted below

The document number of this limited liability company is L16000046857.

Authentication Code: 316A00004879-030916-L16000046857-1/1



Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capital, this the Ninth day of March, 2016

> Ren Wetzner Secretary of State

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	RCM Family Partners, LLC		
SUBJE		Limited Liability	Company
The encl	losed Articles of Organization and fee(s)	are submitted fo	or filing.
Please re	eturn all correspondence concerning this	matter to the fo	lowing:
	Suzanne M. Irwin, Paralegal		
		Name of P	erson
	Flaster/Greenberg P.C.		
		Firm/Com	pany
	1810 Chapel Avenue West, Commer	ce Center	
	, , , , , , , , , , , , , , , , , , , 	Addres	S
	Cherry Hill, NJ 08002		
	buz.eizen@flastergreenberg.com	City/State and	Zip Code
	E-mail address: (to be us	ed for future an	nual report notification)
For furthe	er information concerning this matter, plea	ase call:	•
	Suzanne M. Irwin, Paralegal	856	382-2251
	Name of Person	Area Code	Daytime Telephone Number
Enclose	d is a check for the following amount:		
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certifie	Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314) (2	Atreet Address New Filing Section Division of Corporations Clifton Building 661 Executive Center Circle Fallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RCM Family Par		ON-DC	
(Must e	nd with the words "Limited L	iability Company,	, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stre	et address of the principal offi	ce of the Limited	Liability Company is:
<u>Prin</u>	cipal Office Address:		Mailing Address:
8460 S.W. 142nd	Street	8460	S.W. 142nd Street
6400 5. 11 . 142110		70.1	netto Bay, FL 33158-1053
Palmetto Bay, FI ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, &	Registered Agent egistered Agent.	
Palmetto Bay, FL ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & any cannot serve as its own R an active Florida registration.	Registered Agent egistered Agent.	nt's Signature:
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Palmetto Bay, FL ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & any cannot serve as its own R an active Florida registration. eet address of the registered a Robert Messa	Registered Agent ()) gent are:	nt's Signature:
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Palmetto Bay, FL ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & any cannot serve as its own R an active Florida registration. eet address of the registered a Robert Messa	Registered Agent (a) gent are: Name	nt's Signature: You must designate an individual or

Ma

Registeren Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Citle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	Dalaman
MGR	Robert Messa
	8460 S.W. 142nd Street
	Palmetto Bay, FL 33158-1053
MGR	Caryle Messa
WOK .	8460 S.W. 142nd Street
	Palmetto Bay, FL 33158-1053
	rannetto Bay, 112 33130-1033
	•
Use attachment if necessary)	
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ARTICLE IV-

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