

A20000000048

(Requestor's Name)

(Address)

(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



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2020 FEB -4 PM 3: 23
ALLAH ASSI Filing Office

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20 FEB -4 PM 3: 31

K. SALY
FEB 5 2026

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 2/4/2020

PRIORITY Routine

OUR REF # (Order ID#) 805116

ORDER ENTITY
FEDERATION DAVIE PRESERVATION LP

PLEASE PERFORM THE FOLLOWING SERVICES:
FEDERATION DAVIE PRESERVATION LP (FL)

New LP filing

NOTES:

\$1,000.00 Authorized

Email address for annual report reminders: radiv@incserv.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

FILED
2020 FEB -4 AM 9:23
TALLAHASSEE, FLORIDA

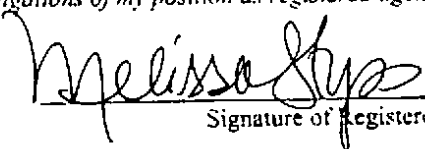
1. Federation Davie Preservation LP
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

2. 250 West 55th Street, 35th Floor
(Street address of initial designated office)
New York, NY 10019

3. Incorporating Services, Ltd.
(Name of Registered Agent for Service of Process)

4. 1540 Glenway Drive
(Florida street address for Registered Agent)
Tallahassee, FL 32301

5. *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.*



Signature of Registered Agent

6. 250 West 55th Street, 35th Fl
(Mailing address of initial designated office)
New York, NY 10019

7. If limited partnership elects to be a limited liability limited partnership, check box .

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2020 FEB -4 AM 9:20

ALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:
 Affordable Housing Institute, Inc.

Business Address:
 2121 Camden Road, Ste. B

 Orlando, FL 32803

9. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 3rd day of February, 2020

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are 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.

Affordable Housing Institute, Inc., its

 General Partner

By: Bryan Hartnett, President

 X Bryan Hartnett

Filing Fees: \$1,000.00 (S965 Filing Fee and S35 Registered Agent Fee)
 Certified Copy (optional): \$52.50
 Certificate of Status (optional): \$8.75