

A24000000184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

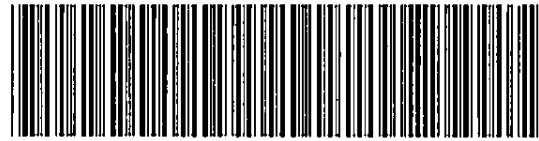
(Document Number)

Certified Copies _____

Certificates of Status _____

Special instructions to Filing Officer:

Office Use Only



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2024 APR 10 PM 2:19

RECEIVED

DB
Department of
Business & Professional
Regulation
FLORIDA

2024 APR 10 PM 2:53

RECEIVED

APR 10 2024

K. Brumbley

Incorporating Services, Ltd.

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

incserv

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 Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 4/10/2024

PRIORITY Regular Approval

OUR REF # (Order ID#) 1244187

ORDER ENTITY

KK PARKWAY PRESERVE, LP

PLEASE PERFORM THE FOLLOWING SERVICES:

KK PARKWAY PRESERVE, LP (FL)

Please file the attached certificate of limited partnership and provide a certificate of status.

NOTES:

\$1,008.75 Authorized

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.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KK Parkway Preserve, LP
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Galina Khavrenko
Contact Person

Firm/Company

391 Creditstone Road
Address

Concord, ON L4K IN8
City, State and Zip Code

GalinaK@highlightmotor.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Galina Khavrenko at (905) 761 1400 ext. 4445
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) \$1,008.75 Filing Fees and Certificate of Status \$1,052.50 Filing Fees and Certified Copy \$1,061.25 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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

1. KK Parkway Preserve, 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. 138 Timber Valley Ave Richmond Hill, ON L4E 4Z7 Canada

(Street address of initial designated office)

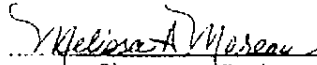
3. Incorporating Services, Ltd.

(Name of Registered Agent for Service of Process)

4. 1540 Glenway Drive, Tallahassee, Florida 32301

(Florida street address for Registered Agent)

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. _____

(Mailing address of initial designated office)

138 Timber Valley Ave Richmond Hill, ON L4E 4Z7 Canada

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

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8. Name and business address of each general partner:

Name:

Business Address:

Pompano Holdings Inc.

138 Timber Valley Ave.

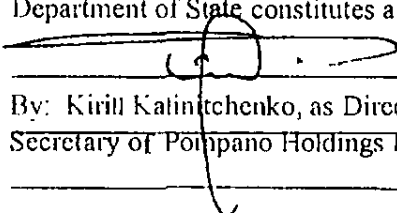
Richmond Hill, ON L4E 4Z7 Canada

9. Effective date, if other than the date of filing: April 10, 2024
(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 10th day of April, 2024

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.


By: Kirill Kalinitchenko, as Director and Secretary of Pompano Holdings Inc.

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75