

B200000000016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

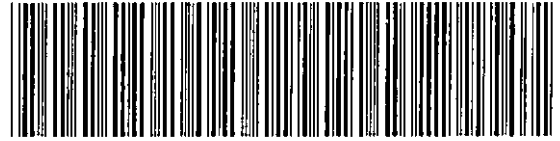
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000339348450

20 JAN 17 PM 4: 08

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2020 JAN 17 PM 4: 39

SS

✓

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 1/17/2020 **PRIORITY** Routine

ORDER ENTITY
SABBIA 503, L.P.

OUR REF # (Order ID#) 802803

2020 JAN 17 PM 4: 39
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE PERFORM THE FOLLOWING SERVICES:

SABBIA 503, L.P. (FL)

File the attached foreign qualification document and provide a certified copy and certificate of good standing as evidence.

NOTES:

\$1,061.25 Authorized
Email address for annual report reminders: lhunt@adslp.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.

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. Sabbia 503, L.P.
 (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 L.L.P.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

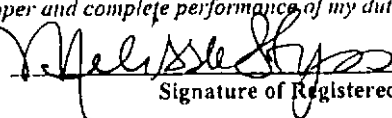
2. Ontario, Canada State or Country of Formation
 3. January 9, 2020 Date of Formation

4. Federal Employer Identification Number: application in process

5. Name of Registered Agent for Service of Process and Florida Street Address:
Incorporating Services, Ltd.
1540 Glenway Drive
Tallahassee, FL 32301

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 2020 JAN 17 PM 4:39
 FILED

6. 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

7. Principal Office:
138 Timber Valley Ave.
Richmond Hill, ON L4E 4Z7
Canada

8. Mailing Address:
138 Timber Valley Ave.
Richmond Hill, ON L4E 4Z7
Canada

9. If limited partnership is a limited liability limited partnership, check box.

10. Name, principal office address, and mailing address of each general partner:

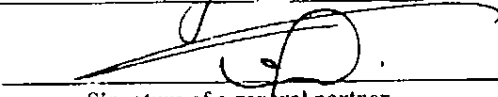
Name of General Partner: <u>Pompano Holdings Inc.</u>	Name of General Partner: _____
Street Address: <u>138 Timber Valley Ave.</u>	Street Address: _____
<u>Richmond Hill, ON L4E 4Z7</u>	_____
Mailing Address: <u>Canada</u>	Mailing Address: _____
_____	_____
Name of General Partner: _____	Name of General Partner: _____
Street Address: _____	Street Address: _____
_____	_____
Mailing Address: _____	Mailing Address: _____
_____	_____

Name of General Partner: _____ Name of General Partner: _____
 Street Address: _____ Street Address: _____

 Mailing Address: _____ Mailing Address: _____

11. Effective date, if other than the date of filing: _____
 (Effective date cannot be prior to nor more than 90 days after the date this 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.

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 16 day of January, 2020


 Signature of a general partner

FILED
 20 JAN 17 PM 4:39
 TALLAHASSEE, FLORIDA
 SECRETARY OF STATE

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

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

Request ID: 024082744
Transaction ID: 74313169
Category ID: UN/E

Province of Ontario
Ministry of Government Services

Date Report Produced: 2020/01/16
Time Report Produced: 12:35:41
Page: 1

LIMITED PARTNERSHIPS REPORT

Firm name registered under the *Limited Partnerships Act*

SABBIA 503, L.P.

Business Identification Number

300033941

Business Type

LIMITED PARTNERSHIP

Mailing Address

138 TIMBER VALLEY AVE
RICHMOND HILL
ONTARIO
CANADA, L4E 4Z7

Address of Principal Place of Business in Ontario

138 TIMBER VALLEY AVE
RICHMOND HILL
ONTARIO
CANADA, L4E 4Z7

General Nature of Business

HOLDING INTEREST IN REAL ESTATE

Jurisdiction of Formation

ONTARIO

Declaration Date

2020/01/09

Expiry Date

2025/01/08

Renewal Date

NOT APPLICABLE

Change Date(s)

NOT APPLICABLE

Last Document Filed

NEW DECLARATION

Dissolution/Withdrawal Date

NOT APPLICABLE

Last Document Filed Date

2020/01/09

Current Partnership Business Names Exist:

NO

Expired Partnership Business Names Exist:

NO

Former Names

NOT APPLICABLE

Date of Name Change

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2020 JAN 17 PM 4:39
FILED