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(Requestor's Name)	_		
(Address)			
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(City/State/Zip/Phone #)	_		
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status	_		
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PHONE: (800) 435-9371; FAX: (866) 860-8395

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11/11/20

NAME:

SHADICK ORANGE CITY, LP

TYPE OF FILING: APPLICATION

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WAGOODIT: FCAOOOOOTS)

AUTHORIZATION ABBIBIPALL HODGE

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

Acceptable Limited Partnership suffixes: Limited P	ed Liability Limited Partnership, which must include suffi- Partnership, Limited, L.P., LP, or Ltd. uffixes: Limited Liability Limited Partnership, L.L.L.P, or Li	
	I partnership or limited liability limited partnership proposes n Florida; must contain acceptable suffix.	to register to transact
Delaware 2.	10/26/2020	
State or Country of Formation	Date of Formation	***
•	85-3743182	
5. Name of Registered Agent for Service of Proce Paracorp Incorporated	ess and Florida Street Address:	
155 Office Plaza Dr., 1st Floor	-	
Tallahassee, FL 32301	_	
of all statutes relative to the proper and complete my position as registered agent. By:	ent and agree to act in this capacity. I further agree to comp e performance of my duties, and I am familiar with and accep	ply with the provisions of the obligations of
s	Signature of Registered Agent	
7. Principal Office:	8. Mailing Address:	
915 Shadick Drive	75 Commerce Dr, #7070	75 ~
915 Shadick Drive Orange City, FL 32763	75 Commerce Dr, #7070 Graysiake, IL 60030	2028 N
	<u> </u>	2028 NOV 1
	Graysiake, IL 60030	5 5
Orange City, FL 32763	Graysiake, IL 60030	ZOSB NOV 16 AH
Orange City, FL 32763 9. If limited partnership is a limited liability limit 10. Name, principal office address, and mailing according to the control of t	Graysiake, IL 60030 ted partnership, check box. ddress of each general partner: GP. LP	5 5
Orange City, FL 32763 9. If limited partnership is a limited liability limit 10. Name, principal office address, and mailing address of General Partner: 715 5th Ayenue SW, Suite 170	Graysiake, IL 60030 ted partnership, check box. ddress of each general partner: GP, LP Name of General Partner:	6 F
Orange City, FL 32763 9. If limited partnership is a limited liability limit 10. Name, principal office address, and mailing according to the control of t	Graysiake, IL 60030 ted partnership, check box. ddress of each general partner: GP, LP Name of General Partner:	16 AH 8:
Orange City, FL 32763 9. If ilmited partnership is a limited liability limit 10. Name, principal office address, and mailing address. Otter Storage Fund II office Address: 715 5th Avenue SW, Suite 170 Calgary, Alberta T2P 2X6 Car 75 Commerce Dr. #7070	Graysiake, IL 60030 ted partnership, check box. ddress of each general partner: GP, LP Name of General Partner: Street Address:	16 AH 8: 41
Orange City, FL 32763 9. If ilmited partnership is a limited liability limit 10. Name, principal office address, and mailing address. Otter Storage Fund II office Address: 715 5th Avenue SW, Suite 170 Calgary, Alberta T2P 2X6 Car 75 Commerce Dr. #7070	Graysiake, IL 60030 ted partnership, check box. ddress of each general partner: GP, LP Name of General Partner:	16 AH 8: 41
9. If ilmited partnership is a limited liability limit 10. Name, principal office address, and mailing at Name of General Partner: Otter Storage Fund II of Street Address: 715 5th Avenue SW, Suite 170 Calgary, Alberta T2P 2X6 Car Mailing Address: Grayslake, IL 60030	Grayslake, IL 60030 ted partnership, check box. ddress of each general partner: GP, LP Name of General Partner: O Street Address: nada Mailing Address:	16 AH 8: 41
9. If ilmited partnership is a limited liability limit 10. Name, principal office address, and mailing at Name of General Partner: Street Address: Calgary, Alberta T2P 2X6 Car Mailing Address: Grayslake, IL 60030 Name of General Partner:	Graysiake, IL 60030 ted partnership, check box. ddress of each general partner: GP, LP Name of General Partner: Street Address:	16 AH 8: 41
9. If ilmited partnership is a limited liability limit 10. Name, principal office address, and mailing at Name of General Partner: Street Address: Calgary, Alberta T2P 2X6 Car Mailing Address: Grayslake, IL 60030 Name of General Partner:	Grayslake, IL 60030 ted partnership, check box. ddress of each general partner: GP, LP	16 AH 8: 41

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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:	es after the date this document is filed by the Florida Department of State.) c applicable statutory filing requirements, this date will not be listed as the
	ated, not more than 90 days prior to the delivery of this application to the or other official having custody of the entity's records in the jurisdiction under
Signed this day of November Officer Storage Fund II GP, LP, General Partner	,20
By: Otter Storage LLC, its General Partner	
By: Will Matthews, Member	
Si	ignature of a general partner
	cts stated herein are true and the individual is aware that false information stitutes a third degree felony as provided for in s.817.155, F.S.
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

Page 2 of 2



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

DELAWARE, DO HEREBY CERTIFY "SHADICK ORANGE CITY, LP" 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 FOURTH DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SHADICK ORANGE CITY, LP" WAS FORMED ON THE TWENTY-SIXTH DAY OF OCTOBER, A.D. 2020.

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

Authentication: 204009374

Date: 11-04-20