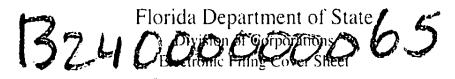
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000090792 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

Email Address:____

FLORIDA/FOREIGN LP/LLLP LEO@SAN MARCO INVESTORS, LP

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$1,008.75

Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: LEO@SAN MARCO INVESTORS, I	_P	
Name of Foreign Limited Parts	nership or Limited	Liability Limited Partnership
The enclosed application, certificate of status and for partnership to transact business in Florida. Please return all correspondence concerning this ma		o register a foreign limited partnership or limited liability limited
Osvaldo F. Torres		
Contact Person		_
Torres Law, P.A.		
Firm/Company		_
888 Southeast Third Avenue, Suite 400		
Address		_
Fort Lauderdale, Florida 33316		
City, State and Zip Code		
ozzie@torreslaw.net		
E-mail address: (to be used for future annual repo	rt notification)	_
For further information concerning this matter, plea	se call:	
Osvaldo F. Torres	754	300-5815
Name of Contact Person		and Daytime Telephone Number
Enclosed is a check for the following amount:		
(\$965 Filing Fee and \$35 Registered Agent Fee)	□\$1,052.50 Fil and Certifie	ing Fees
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

14154847068

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

LEO@SAN MARCO INVEST	ORS, LP	
Acceptable Limited Partnership s	uffixes: Limited Partnersi	ility Limited Partnership, which must include suffix) thip, Limited, L.P., LP, or Ltd. Limited Liability Limited Partnership, L.L.L.P. or LLLP.
If name unavailable, name unde		ership or limited liability limited partnership proposes to register to transact da; must contain acceptable suffix.
2 Delaware		3 February 27, 2024
State or Country of Formation		3. February 27, 2024 Date of Formation
4. Federal Employer Identificat	ion Number	
5. Name of Registered Agent for	r Service of Process and	Florida Street Address:
Torres Law, P.A.		
888 Southeast Third Avenue, Sui	te 400	
Fort Lauderdale, Florida 33316		
of all statutes relative to the pi my position as registered agen	roper and complete perfor	dagree to act in this capacity. I further agree to comply with the provisions mance of my dution and I am familiar with and accept the obligations of which the provisions of the control
7. Principal Office:		8. Mailing Address:
17501 Biscayne Boulevard		17501 Biscayne Boulevard
Suite 300		Suite 300 Aventura, Florida 33160
Aventura, Florida 33160		•
Street Address: Aventura, I Mailing Address: Aventura, I Aventura, I Name of General Partner: Street Address:	ress, and mailing address venir Leo GP, Inc. ayne Boulevard, Suite 300 Florida 33160 ayne Boulevard, Suite 300 Florida 33160	Name of General Partner: Name of General Partner:
		Mailing Address:

Page 1 of 2

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 Note: If the date inserted in this block does not adocument's effective date on the Department of	90 days after the date this document is filed by the Florida Department of State.) neet the applicable statutory filing requirements, this date will not be listed as the State's records.
12. Attached is a certificate of existence duly au Florida Department of State, by the Secretary of the law of which it is organized.	thenticated, not more than 90 days prior to the delivery of this application to the State or other official having custody of the entity's records in the jurisdiction under
Signed this 6th day of Ma	ch
	Signature of a general partner

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

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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "LEOGSAN MARCO INVESTORS, 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 FIFTH DAY OF MARCH, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEOGSAN MARCO INVESTORS, LP" WAS FORMED ON THE TWENTY-SEVENTH DAY OF FEBRUARY,

A.D. 2024.

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

Authentication: 202947277

Date: 03-05-24