D2300000001

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Oity/State/Ztp/Fildite #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
·
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900399919649

01/09/29--01004--018 **958.75

FILED

1023 JAN -9 PM 3: 22

SECREINARY OF A THE

SELEMANSSEE, FRORDS

2023 JAN -9 AM ID 9



Filing Cover Sheet

To: Florida Division of Corporations From: TAYLOR SEAY C/O Capitol Services, Inc. Date: 1/9/2023 Trans#: 1352466 **Entity Name: <u>REVA ONE INDEPENDENCE DST</u>** Articles Incorporation/Formation () Articles of Amendment () Articles of Dissolution () Annual Report () Fictitious Name () Conversion () Foreign Qualification (XX-DST) Limited Liability () Merger () Limited Partnership () Reinstatement () Withdrawal / Cancellation () Other () STATE FEES PREPAID WITH CHECK# 3151 FOR \$358.75 **PLEASE RETURN:** Certified Copy (XX) - Plain Photocopy () Certificate of Fact () Good Standing ()

AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE TO FILE OR QUALIFY

REVA One Independence DST
A Delaware statutory TRUST
In accordance with Section 609.02 of the Florida Statutes, pertaining to Common Law Declarations of Trust, the undersigned, the Chairman of the Board of Trustces of REVA One Independence DST (Name of Trust) Delaware statutory Trust hereby affirms in order to file or qualify (State) REVA One Independence DST (Name of Trust) in the State of Florida. (Name of Trust)
1. Two or more persons are named in the Trust.
2. The principal address is <u>c/o Allegiancy, LLC, 5806 Grove Avenue, Box 112</u>
Richmond, VA 23226
3. The registered agent and street address in the State of Florida is: Capitol Corporate Services, Inc. 515 E. Park Avenue, 2nd Floor Tallahassee, FL 32301
4. Acceptance by the registered agent: Having been named as registered agent to accept service of process for the above named Declaration of Trust at the place designated in this affidavit, I hereby accept the appointment as registered agent and agree to act in this capacity. Taylor Seay, as Asst. Secretary on behalf of Capitol Corporate Services, Inc. (Signature of Registered Agent)
5. I certify that the attached is a true and correct copy of the Declaration of Trust under which the association proposes to conduct its business in Florida.
Name: Chris Sorensen Manager of Sorensen Entity Services LLC, a trustee County/City of Chesterical PUBLIC REG # 7918898 MY COMMISSION: EXPERSIS: Certified Copy: \$ 8.75 (optional) Defore me this 4 day of January 1012 by Christopher Sorensen

Delaware

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF STATUTORY TRUST REGISTRATION OF

"REVA ONE INDEPENDENCE DST", FILED IN THIS OFFICE ON THE FOURTH

DAY OF JANUARY, A.D. 2023, AT 10:10 O'CLOCK A.M.



Authentication: 202419841

Date: 01-04-23

State of Delaware
Secretary of State
Division of Corporations
Delivered 10:10 AM 01:04/2023
FILED 10:10 AM 01:04/2023
SR 20230021845 - File Number 7216941

STATE of DELAWARE CERTIFICATE of TRUST



This Certificate of Trust is filed in accordance with the provisions of the Delaware Statutory Trust Act (Title 12 of the Delaware Code, Section 3801 et seq.) and sets forth the following:

REVA One Independence DST
of the Delaware trustee is
C, located at 1201 N. Orange Street, Suite 7044, 1-1189.
nation the trustees determine to include therein.)

SORENSEN ENTIFY SERVICES LLC

By: Tensteels

Trustee(s)
Chris Sorensen, Manager of Sorensen

Name: Entity Services LLC, the Delaware trustee

Typed or Printed