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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC
Account Number : I20080000067
Phone : (845)425-0077
Fax Number : (845)818-3588

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SECRETARY OF STATE
TALLAHASSEE, FL

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

Email Address: statenotices@vcorpservices.com

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FLORIDA/FOREIGN LP/LLLP

LakeBluff Value Fund, LP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$1,000.00

Electronic Filing Menu

Corporate Filing Menu

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SP

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

1. LakeBluff Value Fund, 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 L.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. Delaware

State or Country of Formation

3. 11/31/2018

Date of Formation

4. Federal Employer Identification Number 82-4768239

5. Name of Registered Agent for Service of Process and Florida Street Address:

Vcorp Services, LLC

5011 South State Road 7, Suite 106

Davie, FL 33314

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.*

Miriam Nachusen

Signature of Registered Agent

Miriam Nachusen
Assistant Secretary

7. Principal Office:

4921 Sabal Lake Circle

Sarasota, FL 34238

8. Mailing Address:

4921 Sabal Lake Circle

Sarasota, FL 34238

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: LakeBluff Capital Management, LLC

Name of General Partner: _____

Street Address: 4921 Sabal Lake Circle

Street Address: _____

Sarasota, FL 34238

Mailing Address: 4921 Sabal Lake Circle

Mailing Address: _____

Sarasota, FL 34238

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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SECRETARY OF STATE
FLORIDA

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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:

(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

15TH

day of

APRIL

20

21



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 "LAKEBLUFF VALUE FUND, 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 NINETEENTH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAKEBLUFF VALUE FUND, LP" WAS FORMED ON THE THIRTY-FIRST DAY OF JANUARY, A.D. 2018.

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



A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

6736022 8300

SR# 20211350918

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203001733

Date: 04-19-21