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(Re	questor's Name)		
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PICK-UP	☐ WAIT	MAIL	
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200291587202



D. SCOTT DEC 1 2016 CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 384237 7667190

AUTHORIZATION:

COST LIMIT : \$ 1/000.00

ORDER DATE: November 29, 2016

ORDER TIME : 8:33 AM

ORDER NO. : 384237-005

CUSTOMER NO: 7667190

DOMESTIC FILING

NAME: GREEN LEVEL REI HOLDINGS, LLLP

EFFECTIVE DATE:

ARTICLES OF INCORPORATION

XX CERTIFICATE OF LIMITED PARTNERSHIP

ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS:

COVER LETTER

	Division of Corporations		
SUBJEC	GREEN LEVEL REI HOI	LDINGS, LLLP	
SCOOL		nership or Limited Liability Limited Partners	hip
The encl	osed Certificate of Limited Partners	hip and fees are submitted for filing.	
Please re	eturn all correspondence concerning	this matter to:	
МІСНЕ	LSA CALDERON		
	Contact Person		
c/o TRI	VEST PARTNERS		
	Firm/Company		
550 S. D	DIXIE HIGHWAY, SUITE 300		
	Address		
CORAL	GABLES, FL 33146		
	City, State and Zip Code		
	DERON@TRIVEST.COM		
E-ma	ail address: (to be used for future annual rep	oort notification)	
For furth	ner information concerning this matte	er, please call:	
MICHE	LSA CALDERON	at (305) 858-2200	
	Name of Contact Person	Area Code and Daytime Telephone Nun	nber
Enclosed	is a check for the following amoun	t:	· 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
(\$965 F	00 Filing Fees \$1,008.75 Filing Fees Filing Fee and gistered Agent Status	\$1,052.50 Filing Fees and Certified Copy Certified Copy Certificate of S	Vand O
	T ADDRESS:	MAILING ADDRESS:	85 55
_	tion Section	Registration Section	_
Clifton E	of Corporations	Division of Corporations P. O. Box 6327	
	ecutive Center Circle	Tallahassee, FL 32314	
	see, FL 32301		

CR2E030 (01/06)

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

GREEN LEVEL REI HOLDINGS, LLLP
(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 LLLP.
2. 550 S. DIXIE HIGHWAY, SUITE 300
(Street address of initial designated office)
CORAL GABLES, FL 33146
3. Corporation Service Company
(Name of Registered Agent for Service of Process)
1_1201 Hays Street
(Florida street address for Registered Agent)
Tallahassee, FL 32301
5. 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. Corporation Service Company Courtney Williams By: Asst. Vice President
5. 550 S. DIXIE HIGHWAY, SUITE 300
(Mailing address of initial designated office)
CORAL GABLES, FL 33146
If limited partnership elects to be a limited liability limited partnership, check box

Page 1 of 2

8. Name and business address of ea Name:	ach general partner: <u>Business Address:</u>	
BLAKE REM, LLC	262 4TH AVENUE NORTH	
	ST. PETERSBURG, FL 33701	
(Effective date cannot be prior to no	filing: or more than 90 days after the date the documents 5	T
filed by the Florida Department of Signed this 29TH day of	of NOVEMBER 2016	FILEL
stated herein are true. I/We am/are a	We submit this document and affirm that the facts ware that any false information submitted in a constitutes a third degree felony as provided for in	
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	