

A1900000131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19-25630

Office Use Only



900325417179

03/04/19--01026--035 **1061.25

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2019 MAR -4 PM 2:22
STATE OF FLORIDA
TALLAHASSEE FLOK-0A

BRUCE
MAR 27 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2019

SARAH MAROTTA GELTZ, ESQ.
KENDRICK LAW GROUP
630 N. WYMORE ROAD, STE 370
MAITLAND, FL 32751

SUBJECT: CORE RE HOLDINGS, LP
Ref. Number: W19000025630

We have received your document for CORE RE HOLDINGS, LP and your check(s) totaling \$1061.25. However, the document has not been filed and is being retained in this office for the following:

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Corporate Records Supervisor

Letter Number: 319A00005262

2019 MAR -4 PM 2:22
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CORE RE HOLDINGS, LP
Name of Resulting Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Conversion, Certificate of Limited Partnership, and fees are submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S.

Please return all correspondence concerning this matter to:

SARAH MAROTTA GELTZ, ESQ.

Contact Person

KENDRICK LAW GROUP

Firm/Company

630 N. WYMORE ROAD SUITE 370

Address

MAITLAND, FL 32751

City, State and Zip Code

SARAH@KENDRICKLAWGROUP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SARAH MAROTTA GELTZ

Name of Contact Person

at (407) 641-5847

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$1,052.50 Filing Fees ☒ \$1,061.25 Filing Fees ☐ \$1,105.00 Filing Fees ☐ \$1,113.75 Filing Fees,
(\$52.50 for Conversion and Certificate of and Certified Copy Certified Copy, and
and \$1,000 - Certificate) Status Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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2019 MAR -4 PM 2:22
STATE OF FLORIDA
TALLAHASSEE, FL 32314

Certificate of Conversion
For
"Other Business Organization"

Into
Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion **and attached Certificate of Limited Partnership** are submitted to convert the following "Other Business Entity" into a **Florida Limited Partnership or Limited Liability Limited Partnership** in accordance with s.620.2104, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

CORE RE HOLDINGS, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)

on JANUARY 23, 2018
(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the **attached Certificate of Limited Partnership**:

CORE RE HOLDINGS, LP

(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)

4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.

5. If not effective on the date of filing, enter the effective date: _____
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

6. The conversion is permitted by the applicable law(s) governing the other business entity and the other business entity complies with such law(s) in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

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2018 MAR -4 PM 2:22
CLERK OF STATE
TALLAHASSEE, FLORIDA

Signed this 15 day of JANUARY, 2019.

Signature of Each General Partner Listed in Attached Certificate of Limited Partnership/Limited Liability Limited Partnership: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature: [Signature]
Printed Name: JUSTIN CORE Title: MANAGER

Signature: [Signature]
Printed Name: MEGAN CORE Title: MANAGER

Signature: [Signature]
Printed Name: RANDALL CORE Title: MANAGER

Signature: [Signature]
Printed Name: CHERYL CORE Title: MANAGER

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Required Signature(s) on behalf of Other Business Entity: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s)].

Signature: [Signature]
Printed Name: JUSTIN CORE Title: MANAGER

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$ 52.50
Fees for Florida Certificate of Limited Partnership: (\$965 Filing Fee and \$35 Filing Fee)	\$1,000.00
Certified Copy:	\$ 52.50 (Optional)
Certificate of Status:	\$ 8.75 (Optional)

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2019 MAR -4 PM 2:22
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF FLORIDA

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

1. CORE RE HOLDINGS, 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 LLLP.

2. 95 E. MITCHELL HAMMOCK ROAD #102

Street address of initial designated office

OVIDO, FL 32765

3. KENDRICK LAW GROUP

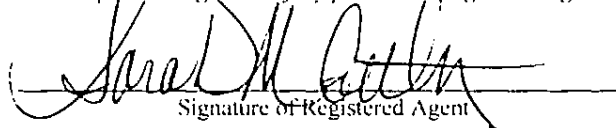
Name of Registered Agent for Service of Process

4. 630 N. WYMORE ROAD SUITE 370

Florida street address for Registered Agent

MAITLAND, FL 32751

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 an acceptance of the obligations of my position as registered agent.*


Signature of Registered Agent

6. 95 E. MITCHELL HAMMOCK ROAD #102 OVIDO, FL 32765

Mailing address of initial designated office

7. If limited partnership elects to be a limited liability limited partnership, check box ☐.

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TALLAHASSEE
FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

JUSTIN CORE

95 E. MITCHELL HAMMOCK RD. #102

OVIEDO, FL 32765

MEGAN CORE

95 E. MITCHELL HAMMOCK RD. #102

OVIEDO, FL 32765

RANDALL CORE

95 E. MITCHELL HAMMOCK RD. #102

OVIEDO, FL 32765

CHERYL CORE

95 E. MITCHELL HAMMOCK RD. #102

OVIEDO, FL 32765

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2019 MAR -4 PM 2:22
CLERK OF DISTRICT COURT
JACKSONVILLE FLORIDA

Signed this 15TH day of JANUARY, 2019.

Signature of each general partner: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.