

A200000000006

(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:

other bus  
entering into FL LP  
wrong form W/L  
94678

Office Use Only



000334947660

11/22/19--01037--001 \*\*1031.25

10/08/19--01018--006 \*\*30.00

FILED

2019 DEC -9 PM 1:33



RECEIVED

DEC 09 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 4, 2019

KEITH CAMPBELL  
HAVEN CAMPUS COMMUNITIES, LLC  
3284 NORTHSIDE PKWY., NW SUITE 500  
ATLANTA, GA 30327

SUBJECT: HCC- NADG PARTNERS, L.P.  
Ref. Number: W19000094678

We have received your document for HCC- NADG PARTNERS, L.P. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Line item number 5. Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon  
Regulatory Specialist II Supervisor

Letter Number: 019A00024512

RECEIVED

NOV 04 2019



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 25, 2019

KEITH CAMPBELL  
HAVEN CAMPUS COMMUNITIES, LLC  
3284 NORTHSIDE PKWY., NW SUITE 500  
ATLANTA, GA 30327

SUBJECT: NCC- NADG PARTNERS, L.P.  
Ref. Number: W19000094678

We have received your document for NCC- NADG PARTNERS, L.P. and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10~~0~~1.25.

The form you submitted is for a Conversion paperwork to convert a Florida LLC into an Other Business Entity, but your entity is a Other Organization into a Florida Limited Partnership or Limited Liability Limited Partnership. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon  
Regulatory Specialist II Supervisor

Letter Number: 619A00022067

2019-10-25 10:11:11

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HCC - NADG PARTNERS, L.P.  
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:

KEITH CAMPBELL

\_\_\_\_\_  
Contact Person

HAVEN CAMPUS COMMUNITIES, LLC

\_\_\_\_\_  
Firm/Company

3284 NORTHSIDE PKWY., NW SUITE 500

\_\_\_\_\_  
Address

ATLANTA, GEORGIA 30327

\_\_\_\_\_  
City, State and Zip Code

kcampbell@madisonretailllc.com

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

For further information concerning this matter, please call:

KEITH CAMPBELL

at ( 770 ) 818-4133

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
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   and 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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2018 DEC -9 PM 1:33

RECEIVED  
TALLAHASSEE, FLORIDA

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:

HCC - NADG PARTNERS, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LLC  
(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 OCTOBER 7, 2019 9/12/2019  
(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:

HCC - NADG PARTNERS, L. P.

(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.

Signed this 7th day of November, 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: \_\_\_\_\_  
Printed Name: JOHN A WILLIAMS JR. Title: CO-MANAGING MEMBER

Signature: \_\_\_\_\_ for Haven Campus Communities-FGCU, LLC  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

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: \_\_\_\_\_  
Printed Name: JOHN A WILLIAMS, JR. Title: CO-MANAGING MEMBER

**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: (S965 Filing Fee and S35 Filing Fee)	\$1,000.00
Certified Copy:	\$ 52.50 (Optional)
Certificate of Status:	\$ 8.75 (Optional)

FILED  
2019 DEC -9 PM 1:35  
TALLAHASSEE, FLORIDA  
STATE DEPT. OF REVENUE

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

FILED  
2018 DEC -9 PM 1:33  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

1. HCC - NADG PARTNERS, L.P.

(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. 3284 NORTHSIDE PKWY., NW SUITE 500

Street address of initial designated office

ATLANTA, GEORGIA 30327

3. BRYAN J. STANLEY

Name of Registered Agent for Service of Process

4. 209 TURNER STREET

Florida street address for Registered Agent

CLEARWATER, FLORIDA 33756

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.



Signature of Registered Agent

6.

Mailing address of initial designated office

209 TURNER STREET, CLEARWATER, FLORIDA 33756

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

8. Name and business address of each general partner:

Name:

Business Address:

Haven Campus Communities - FGCU, LLC

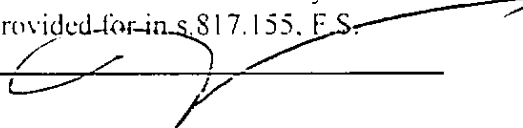
3284 NORTHSIDE PKWY., NW SUITE 500

ATLANTA, GA 30327

FILED  
2019 DEC -9 PM 1:33  
ALABAMA CLERK

Signed this 7<sup>th</sup> day of NOVEMBER, 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.

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_