5/9/22, 1:20 PM

Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number : 075350000132 Phone : (305)374-7580 Fax Number : (305)351-2122

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

Fora i 1	Address:	

FLORIDA/FOREIGN LP/LLLP VC SEAVIEW, LTD.

Certificate of Status	1
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Page Count	02
Estimated Charge	\$1,061.25

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Corporate Filing Menu

Help

S. ROBERTS

MAY 0 9 2022

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

VC Seaview, Ltd.	
(Name of Limited Partnership or Limited Lizbility 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. 3030 Hartley Road, Suite 310	
(Street address of imital designated office)	
Jacksonville, FL 32257	
3 Vestcor, Inc.	
(Name of Registered Agent for Service of Process)	
4. 3030 Hartley Road, Suite 310	
(Florida street address for Registered Agent)	
Jacksonville, FL 32257	
5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to with the provisions of all statutes relative to the proper and complete performance of my duties, and I am fawith and accept the obligations of my position as registered agent. Signature of Registered Agent	
2020 Harday Bond Suite 210	— ₽ i÷
6. 3030 Hartley Road, Suite 310	AH 10: 51
(Mailing address of initial designated office)	: <u>:</u> :
Jacksonville, FL 32257	- -

7. 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:	ch general partner: Business Address:	
VC Seaview GP, LLC	3030 Hartley Road, St	nite 310
	Jacksonville, FL 3225	7
<u></u>	<u> </u>	
-		
	<u> </u>	
	<u> </u>	·
	* ************************************	
9. Effective date, if other than the d (Effective date cannot be prior to no the Florida Department of State.) Note: If the date inserted in this block this date will not be listed as the doc	or more than 90 days after the	ble statutory filing requirements
Signed this 9th	day of May	2022
Signature of each general partner: If herein are true, I/We am/are aware to Department of State constitutes a things: VC Seaview GP, LLC, General Partner Bx Vestcor, Inc., Manager of the General Partner December 19	We submit this document ar hat any false information su and degree felony as provide	bmitted in a document to the
Name: John D. Rood, President		
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Foc as \$52.50 \$8.75 Page 2 of 2	nd \$35 Registered Agent Fee)