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Florida Department of State
Division of Corporations
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FLORIDA/FOREIGN LP/LLLP

EPISCOPAL CATHOLIC APARTMENTS OWNER, LLLP

Certificate of Status	1
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S. FRANKLIN
AUG 26 2022

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

1. Episcopal Catholic Apartments Owner, 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. 1100 NW 4th Avenue,

(Street address of initial designated office)

DELRAY BEACH, FL 33444

3. CORPORATION COMPANY OF MIAMI

(Name of Registered Agent for Service of Process)

4. 200 S. BISCAYNE BLVD. SUITE 4100 (GIC)

(Florida street address for Registered Agent)

MIAMI, FLORIDA 33131

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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 Gary J. Cohen, Vice President

6. 1100 NW 4th Avenue,

(Mailing address of initial designated office)

Delray Beach, FL 33444

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:
EPISCOPAL-CATHOLIC APARTMENTS, INC.	500 AVENUE L, N.W.
	WINTER HAVEN, FL 33881

9. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the 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.

Signed this 24th day of August 2022.

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any 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)
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