

A22000000655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

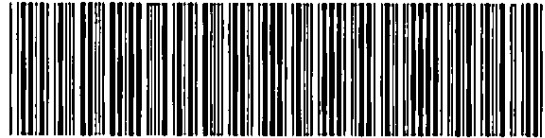
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800395778718

APPROVED
AND
FILED

2022 NOV 28 PM 12:23

2022 NOV 28 PM 4:33

NOV 29 2022
K. Brumby

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 11/28/2022

PRIORITY Regular Approval

OUR REF.# (Order ID#) 1093148

ORDER ENTITY
UGP 36 NE 65TH LP

PLEASE PERFORM THE FOLLOWING SERVICES:

UGP 36 NE 65TH LP (FL)

Please file the attached and provide a certificate of status.

NOTES:

\$1,008.75 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "WJ" or similar, written over a horizontal line.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UGP 36 NE 65th LP
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Urban Growth Miami LLC

Contact Person

Firm/Company

382 NE 191st PMB 78674

Address

Miami Florida 33179-3899 US

City, State and Zip Code

Thomas@urbangrowthproperties.com

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

For further information concerning this matter, please call:

Thomas Bayles

Name of Contact Person

at (626) 636-5061

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$1,000.00 Filing Fees
(\$965 Filing Fee and
\$35 Registered Agent
Fee)
- ☒ \$1,008.75 Filing Fees
and Certificate of
Status
- ☐ \$1,052.50 Filing Fees
and Certified Copy
- ☐ \$1,061.25 Filing Fees,
Certified Copy, 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

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

UGP 36 NE 65th LP

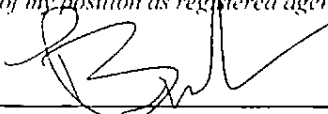
1. _____
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

2. 382 NE 191st St PMB 78674
(Street address of initial designated office)
Miami Florida 33179-3899

3. Urban Growth Miami LLC
(Name of Registered Agent for Service of Process)

4. 382 NE 191st St PMB 78674
(Florida street address for Registered Agent)
Miami Florida 33179-3899

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

Thomas Bayles

6. 382 NE 191st St PMB 78674
(Mailing address of initial designated office)
Miami Florida 33179-3899

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

APPROVED
AND
FILED
2022 NOV 28 PM 12:23
CLERK OF DISTRICT COURT
NINTH JUDICIAL CIRCUIT
MIAMI, FLORIDA

8. Name and business address of each general partner:

Name:

Urban Growth Miami LLC

Business Address:

382 NE 191st St PMB 78674

Miami Florida 33179-3899

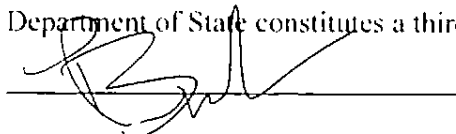
9. Effective date, if other than the date of filing: _____

(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 24 day of October, 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.



Thomas Bayles, Managing General Partner

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75