

# A22000000712

Florida Department of State  
Division of Corporations  
Section: Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)214-8442

2022 Dec 27 11:34

2022 Dec 27 PM 8:17

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

Email Address: \_\_\_\_\_

### FLORIDA/FOREIGN LP/LLP

~~Shill Surfside LP~~ SHILL SURF LP

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$1,008.75

S. ROBERTS

DEC 27 2022



December 21, 2022

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CORPORATE CREATIONS INTERNATIONAL INC.

SUBJECT: SHILL SURFSIDE LP  
REF: W22000156790

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name you have chosen is already taken by another entity that is registered with this office.

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

STANTON H ROBERTS  
Regulatory Specialist II

FAX Aud. #: H22000427627  
Letter Number: 522A00028511

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

1. SHILL SURF 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

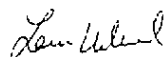
2. 250 WEST ST., UNIT 4C  
(Street address of initial designated office)  
NEW YORK, NY 10013

3. REINER & REINER, P.A.  
(Name of Registered Agent for Service of Process)

4. 9100 S DADELAND BLVD, STE 901  
(Florida street address for Registered Agent)  
MIAMI, FL 33156

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.*

REINER & REINER, P.A.



By: Lauren Underwood, Attorney-in-Fact

Signature of Registered Agent

6. 9100 SOUTH DADELAND BLVD., SUITE 901  
(Mailing address of initial designated office)  
MIAMI, FL 33156

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

2022 Dec 22 AM 8:47

8. Name and business address of each general partner:

Name:

Business Address:

13585743 Canada Inc.

2441 rue de Rushbrooke

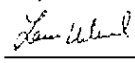
Montréal QC H3K 1T4 Canada

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 20th day of December, 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.



13585743 Canada Inc. - GP

By: Lauren Underwood, Attorney-in-Fact

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