A23000000270

(Requestor's Name)
(Address)
(Andrews)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Warne)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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¹Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

ORDER FORM

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 ; 5/24/2023	PRIORITY Regular Approval	OUR REF.# (Order ID#), 1151576
---------------------------------	---------------------------	--------------------------------

ORDER ENTITY

LOYALTY REAL ESTATE INVESTMENTS LP

PLEASE PERFORM THE FOLLOWING SERVICE LOYALTY REAL ESTATE INVESTMENTS LP	(FL)		
Please file the attached articles and provide a ce	ertified copy and c	ertificate of status.	
NOTES: \$1,061.25 Authorized	,		
PETIEN/FORWARDING INSTRUCTIONS	7	;	

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

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

Sincerely,

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.

Wednesday, May 24, 2023 Page 1 of 1

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJF	CCT: Loyalty Real Estate Investments LP		
50501		p or Limited Liability Limited Partnership	
The end	closed Certificate of Limited Partnership and	d fees are submitted for filing.	
Please	return all correspondence concerning this m	atter to:	
	Avi Guttman		
	Name c	f Person	
	Altro LLP		
	Firm/C	ompany	
	155 University Avenue, Suite 300		
	Ado	Iress	
	Toronto, Ontario, Canada, M5H 3B7		
	City/State a aguttman@altrolaw.com	nd Zip Code	
	E-mail address: (to be used for future	annual report notification)	
For further	r information concerning this matter, please call:		
	Avi Guttman 514	940-8077	
	Name of Person Area Code	Daytime Telephone Number	
Enclose	ed is a check for the following amount:		
(\$96: \$35 I	00.00 Filing Fees S1,008.75 Filing Fees S1, 5 Filing Fee and and Certificate of and Registered Agent Status	052.50 Filing Fees Certified Copy Certificate of Status	
Registr Divisio Clifton 2661 E	ET ADDRESS: ation Section n of Corporations Building xecutive Center Circle ssee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

CR2E030 (6/17)

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

/s/ Tom Glover Signature of Registered Agent 5 548 Beaver Court, Milton, Ontario, Canada, L9T 4A9	123 MAY 25 PH 1: 47
/s/ Tom Glover	72
	- T
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 fai with and accept the obligations of my position as registered agent.	f iff ar
(Florida street address for Registered Agent)	
1. 7901 4th St N STE 300, St. Petersburg, FL 33702, USA	
(Name of Registered Agent for Service of Process)	
Northwest Registered Agent LLC	
(Street address of initial designated office)	
7901 4th St N STE 300, St. Petersburg, FL 33702, USA	
uffixes: Limited Liability Limited Partnership, L.L.L.P. or 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	

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

<u>Name:</u>		Business Address:	
Jones and Investors LLC		7901 4th St N STE 30	0
		St. Petersburg, FL, 33	702. USA
	 .		
	•		
	-		
	-		
		·	
	-		
9. Effective date, if other than the c			
(Effective date cannot be prior to not the Florida Department of State.) Note: If the date inserted in this blothis date will not be listed as the doc	ek does n	ot meet the applical	ble statutory filing requireme
Signed this23rd	_ day of_	May	2023
Signature of each general partner: Le herein are true. I/We am/are aware aware bepartment of State constitutes a the	that any fa	alse information sub	omitted in a document to the
/s/ Clay Jones	_	Clay Jones, Authorize	
		Jones and Investors I	LIC
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.0 \$52.50 \$8.75	00 (\$965 Filing Fee an	d \$35 Registered Agent Fee)

Page 2 of 2