A24000005289

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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CORPORATE ACCESS,

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When you need ACCESS to the world

INC.

236 Fast 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

7 (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

CI	ERTIFIED COPY					
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FI	LING	<u>I.P</u>				
OBEN	SOUTH INV	ESTMENTS,	LP			
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		OCUMENT #)	. <u>.</u>			

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Oben South Investments, LP	
	artnership or Limited Liability Limited Partnership
The enclosed Certificate of Limited Partner	ship and fees are submitted for filing.
Please return all correspondence concerning	g this matter to:
Julian Battiston	
Contact Person	
Andrean Holdings Corp.	
Firm/Company	
2 Sheppard Avenue East, Suite 502	
Address	
North York, Ontario, M2N5Y7	
City, State and Zip Code	
jb@obenflats.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this mat	ter, please call:
Julian Battiston	_at (416)822-7721
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount	nt:
\$1,000.00 Filing Fees S1,008.75 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	\$1,052.50 Filing Fees S1,061.25 Filing Fees, and Certified Copy 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

CR2E030 (6/17)

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

Oben South Investments, LP	. <u></u>
Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.	
2. 400 N. Ashley Drive, Suite 3100	
(Street address of initial designated office)	
Tampa, Florida 33602	<u>.</u>
Chestnut Business Services, LLC	
(Name of Registered Agent for Service of Process)	
1. 400 N. Ashley Drive, Suite 3100	
(Florida street address for Registered Agent)	
Tampa, Florida 33602	 ·
5. I hereby accept the appointment as registered agent and agree to act in this capacity with the provisions of all statutes relative to the proper and complete performance of my with and accept the obligations of my position as registered agent.	
Signature of Registered Agent	-
5. 400 N. Ashley Drive, Suite 3100	
(Mailing address of initial designated office)	
Tampa, Florida 33602	
7. If limited partnership elects to be a limited liability limited partnership,	check box □.
and the control of th	

Name:	Business Address	<u>s:</u>
Oben South Investments GP, Inc.	400 N. Ashley Driv	e, Suite 3100
	Tampa, Florida 336	02
	<u> </u>	
		
		
		
9. Effective date, if other than the		the Jean the Jeanness in Glad be
(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 do	• •	
Signed this	day of	2024
Signature of each general partner: I herein are true. I/We am/are aware Department of State constitutes a th	that any false information:	submitted in a document to the
Julian Battiston		
Filing Fees:	\$1,000.00 (\$965 Filing Fee	and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50	-