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| (Requestor's Name) | | |
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| (Cir | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Ві | ısiness Entity Nan | ne) |
| (Document Number) | | |
| Certified Copies Certificates of Status | | of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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SECRETARY OF STARS

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EXAMINER

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| | | COVER LETTE | R | |
|--|--|---|---|------------------------------|
| TO: Registration Se Division of Cor | | | | |
| SUBJECT: Florida Ret | ail General Partner, LP | | | |
| | ne of Foreign Limited Parts | nership or Limited Liabi | lity Limited Partnership | - |
| partnership to transact be | n, certificate of status and fe usiness in Florida. ondence concerning this ma | | ster a foreign limited partnership | or limited liability limited |
| Scott Withrow | | | | |
| | Contact Person | | | |
| Withrow, McQuade & 0 | Olsen, LP | | | |
| | Firm/Company | | | |
| 3379 Peachtree Road N | E, Suite 970 | | | |
| | Address | | | |
| Atlanta, Georgia 30326 | | | | |
| C | City, State and Zip Code | | | |
| swithrow@wmolaw.cor | n | | | |
| E-mail address: (to be | used for future annual repor | rt notification) | | |
| For further information of | concerning this matter, plea | se call: | | |
| Scott Withrow | | at (404)81 | 4-0200 | |
| Name of Conta | ct Person | | aytime Telephone Number | 2012 FALL |
| Enclosed is a check for t | he following amount: | | | ZOIZ DEC |
| ☐ \$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 Fe and Certified Copy | es \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status | ILCID |

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

FLORIDA DEPARTMENT OF STATE Division of Corporations

December 14, 2012

SCOTT WITHROW WITHROW, MCQUADE & OLSEN, LP 3379 PEACHTREE ROAD NE, SUITE 970 ATLANTA, GA 30326

SUBJECT: FLORIDA RETAIL GENERAL PARTNER, LP

Ref. Number: W12000061927

We have received your document for FLORIDA RETAIL GENERAL PARTNER, LP and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tammi Cline Regulatory Specialist II

Letter Number: 312A00029584 SECRETARY OF STARY O

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

| Acceptable Limited Partnership suffixes: Limited Partner | ibility Limited Partnership, which must include suffix) rship, Limited, L.P., L.P., or Ltd. 1: Limited Liability Limited Partnership, L.L.L.P. or LLLP. | | |
|---|---|-------------------|-------------|
| If name unavailable, name under which the limited parts business in Flor | nership or limited liability limited partnership proposes to re rida; must contain acceptable sulfix. | egister to transf | içi |
| 2. Georgia | 3, 10/19/2012 | _ | |
| State or Country of Formation | Date of Formation | | |
| Federal Employer Identification Number: 80-085905 | 12 | | |
| 5. Name of Registered Agent for Service of Process and | d Florida Street Address: | | |
| C T Corporation System | • | | |
| 1200 South Pine Island Road | | | |
| Plagtation, Florida 33324 | • | | |
| r reduction I to see a 222-7 | | | |
| | are of Registered Agent Nathon S. Giffin Asst. Se | ecretary. | 201 |
| Principal Office: 401 Penchiree Street, Suite 400 | 8. Mailing Address: 1401 Poschtres Street, Suits 400 | 52 | 20 |
| | • | | IIZ DEC |
| Atlanta, Georgia 30309 | Atlanta, Georgia 30309 | 36 2 | |
| | · | · EPO | |
| | | | - |
| If limited an emorphic is a limited liability limited out | rimerable, check box . | S. F. | _ |
| • | | F STA | 2: |
|). Name, principal office address, and mailing address Plocks Remit GP SPR Inc. | s of each general partner; | F STATE | 2:5 |
| Name, principal office address, and mailing address Name of General Partner. 1401 Peachtree Street, Suits 400 | of each general partner; Nume of General Partner; | F STARE | 2:55 |
| Name, principal office address, and mailing address Name of General Partner: Florida Retail GP SPB, Inc. Street Address: 1401 Peachtree Street, Suits 400 | s of each general partner; | FSTAKE | _ 2: 5€ |
| Name, principal office address, and mailing address Name of General Partner: Proposition Propo | of each general partner; Nume of General Partner; | FSTARE | 2:55 |
| Name, principal office address, and mailing address Name of General Partner: Florida Retail GP SPB, Inc. Street Address: 1401 Peachtree Street, Suits 400 | of each general partner; Nume of General Partner; | \$20/49 32 | 2:55 |
| Name, principal office address, and mailing address Name of General Partner: Piorida Retail GP SPB, Inc. 1401 Peachtree Street, Suits 400 Atlanta, Georgia 30309 Malling Address: | Name of General Pariner: Street Address: | (D)/(1) | 2:56 |
| Street Address: 1401 Peachtree Street, Suits 400 Atlanta, Georgia 30309 Malling Address: | Name of General Partner: Street Address: Malling Address: | (D)/(1) | 2:56 |

| | Page 1 of 2 Name of General Partner: |
|---|--|
| Street Address: | Street Address: |
| - Mailing Address: | Mailing Address: |
| 11. Effective date, if other than the date of filing: date of filing (Effective date cannot be prior to nor more than 90 days after the | e date this document is filed by the Florida Department of State:) |
| 12. Attached is a certificate of existence duly authenticated, not n Florida Department of State, by the Secretary of State or other of the law of which it is organized. | nore than 90 days prior to the delivery of this application to the ficial having custody of the entity's records in the jurisdiction under |
| Signed this 11th day of December | ,20 12 |
| Signature Signature | thron Attorney In fact, Signing on behalf of a general partner |
| The individual signing this document affirm that the facts stated I submitted in a document to the Department of State constitutes a | herein are true and the individual is aware that false information |

Page 2 of 2

\$52.50

\$8.75

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

Filing Fees: Certified Copy (optional):

Certificate of Status (optional):

2012 DEC 18 PM 2: 56

Control No. 12084456

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Drive Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

FLORIDA RETAIL GENERAL PARTNER, LP

Domestic Limited Partnership

was formed or was authorized to transact business on 10/19/2012 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 11th day of December, 2012

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 9460440-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp