

Division of Corporations

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BI 3000220382

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.

(((H13000220396 3)))



H130002203963ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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
TSG ENTERPRISES LIMITED PARTNERSHIP**

Certificate of Status	0
Certified Copy	0
Page Count	08/6
Estimated Charge	\$1,000.00

d/b/a Gulfstream Village Enterprises Limited Partnership

RE-SUBMIT

Electronic Filing Menu

Corporate Filing Menu

Please retain original filing
date of submission 10/3

10/4/2013 8:43:56 From: To: 8506176383

(2/6)

850-817-8381

10/4/2013 8:40:54 AM PAGE 1/001 Fax Server

RECEIVED
13 OCT -4 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



October 4, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: TSG ENTERPRISES LIMITED PARTNERSHIP
REF: W13000055182

FILED
2013 OCT -3 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 of your limited partnership or limited liability limited partnership is not available. A foreign limited partnership or limited liability limited partnership whose name is not available must adopt an alternate name for use in the state of Florida. Please insert the alternate name in the space provided.

NOTE: The alternate name must contain an acceptable suffix. Acceptable limited partnership suffixes include: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable limited liability limited partnership suffixes include: Limited Liability Limited Partnership, LLLP, or L.L.L.P.

The document number of the name conflict is L12000042883 "TSG ENTERPRISES, LLC".

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

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H13000220396
Letter Number: 313A00023318

RE-SUBMIT

Please retain original filing
date of submission 10/3

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TSG ENTERPRISES LIMITED PARTNERSHIP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.

Please return all correspondence concerning this matter to:

Laura O'Malley

Contact Person

The Stronach Group

Firm/Company

455 Magna Drive

Address

Aurora, Ontario Canada L4G 7A9

City, State and Zip Code

laura.omalley@stronachgroup.com

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

For further information concerning this matter, please call:

Laura O'Malley

at (905)

726-7082

Name of Contact Person

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 Fee,
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

FILED
2013 OCT - 3 AM 11:00
TALLAHASSEE FLORIDA

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

1. TSO ENTERPRISES LIMITED PARTNERSHIP

(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.

Gulfstream Village Enterprises Limited Partnership

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Delaware

State or Country of Formation

3. September 26, 2013

Date of Formation

4. Federal Employer Identification Number: 46-3767661

5. Name of Registered Agent for Service of Process and Florida Street Address:

C.T. Corporation System

1200 South Pine Island Road

Plantation, Florida 33324

6. 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.

By: C.T. Corporation System

Signature of Registered Agent

Debbie Diaz
Assistant Secretary

7. Principal Office:

901 S. Federal Highway

Hollandale Beach

Florida, USA 33009

8. Mailing Address:

445 Magna Drive

Aurora, Ontario

Canada L4G 7A9

9. If limited partnership is a limited liability limited partnership, check box.

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: TSO US GP INC.

Name of General Partner: _____

Street Address: 455 Magna Drive

Street Address: _____

Aurora, Ontario Canada L4G 7A9

Mailing Address: 455 Magna Drive

Mailing Address: _____

Aurora, Ontario Canada L4G 7A9

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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TALLAHASSEE FLORIDA

FILED

Page 1 of 2

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

11. Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 30th day of September 20 13

Signature of a general partner
John Simonetti, CEO - TSG US GP INC.

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.135, F.S.

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Page 2 of 2

FILED
 2013 OCT -3 AM 11:00
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TSG ENTERPRISES LIMITED PARTNERSHIP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF SEPTEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5405631 8300

131137218

You may verify this certificate online
at corp.delaware.gov/authwar.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0772172

DATE: 09-27-13