Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H14000067486 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

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date of submission

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone : (850)222-1092 : (850)878-5368 Fax Number

**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/LLLP Eli Community Partners LP

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March 21, 2014

FLORIDA DEPARTMENT OF STATE Division of Corporations

C T CORPORATION SYSTEM

REF: W14000018190

SUBJECT: ELI COMMUNITY PARTNERS LP

RE-SUBMIT

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date of submission 32-114

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.

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Agnes Lunt Regulatory Specialist II FAX Aud. #: H14000067486 Letter Number: 614A00006159

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Eli Community Partners LP					
Name of Foreign Limited Par	rtnership or Limited	Liability	Limited Partnership		
The enclosed application, certificate of status and partnership to transact business in Florids. Please return all correspondence concerning this n		o registe:	r a foreign limited partnership or li	imited Hability	y limli
Michael Bellman				(5) (2) (2) (3)	2014 HAR
Contact Person	· · · ·	-		em om De Fi	
Eli Community Partners LP				" [1	20
Firm/Company	· · · ·	_		MASSE MASSE	20
162 Cumberland Street, Suite 300				%-< 	
Address		_		T = T	=
Toronto, Ontario M5R 3N5				25 25 25	12F
City, State and Zip Code		_		S TWISE	(S)
mbellman@revest.com				17-	., •
E-mail address: (to be used for future annual rep	ort notification)				
For further information concerning this matter, ple	ease call:				
Courtney L. Scanlon	ai (716	, 848-1	538		
Name of Contact Person		and Days	ime 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	8 \$1,052.50 Fili and Certified Co		© \$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 AD Registration Sec Division of Con P. O. Box 6327 Tallahassee, FL	tion porations			

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

(Name of Limited Partnership or Limited Limited Furtnership, which must include suffix) Acceptable Limited Partnership suffices: Limited Partnership, Limited, L.P., L.P., or Ltd. Acceptable Limited Liability Limited Partnership suffices: Limited Liability Limited Partnership, L.L.L.P., or LLLP.				
	ter which the limited partnership business in Florida; m	or limited lichility limited partnership proposes to reast contain acceptable suffix.	gister to transact	
2. Delaware		3, 05/06/2013		
State or Cou 4. Federal Employer (dentific	atry of Formation atten Number 46-3717257	Dute of Fermation	Fig. 10	
	or Service of Process and Flori	ida Street Address:	AHA SS	
800 Senguie Drive			/rs -<	
Deiray Beach, Florida, 33483				
of all statutes relative to the my position as registered age 7. Principal Office:	nt. Howard Steinberg By: Signature of	e to act in this capacity. I further agree to comply we of my distes, and I am familiar with and accept the Registered Agent. Registered Agent. Mailtog Andress:	e opplitations of t	
162 Comberland Street, Snite 3		Cumberland Street, Suite 300		
Terento, Ontario MSR 3NS		Corcesto, Castatio MSR 3N5		
10. Name, principal office add Name of General Partner. Street Address: Toronto, Mailing Address: 162 Com	imited Hability limited partners frees, and mailing address of er oranimity Partners (USA) GP in teriand Street, Sains 300 Oranio MSR 3NS orland Street, Sains 300 Oranio MSR 3NS	seb general partner:		
Name of General Partner:		Name of General Partner		
				
Mailing Address		Melling Address:		
				

Name of General Pariner	Page 1 of 2 Name of General Partner					
Street Address:	Stroet 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.)						
	more than 90 days prior to the delivery of this application to the filicial having eastedy of the entity's records in the jurisdiction under the file of the control of the					
Signed this 13 day of March	AHAN 2					
Michael Bellman, Tressum of General Portner The individual signing this document affirm that the facts stated have not and the individual is aware that falso information submitted in a document to the Department of State constitutes a third degree fellows as provided for in a 817.155, F.S.						
Certified Copy (optional):	51,980.00 (5965 Filing Fee and 535 Registered Agent Fee)					

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Delaware

DACE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ELI COMMUNITY PARTNERS LP" 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 TWENTIETH DAY OF MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5329819 8300

140356338

tou may worley cals certificate onlin at carp.delaware.gov/authver.whtml Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 1223823

DATE: 03-20-14