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COVER LETTER
WALK IN .
ENTITY NAME: Paradise Beach Club Rentals
CK #
AMOUNT: \$ 6315.00
PLEASE FILE THE ATTACHED AND RETURN:
PLAIN COPY
X CERTIFIED COPY
PLEASE CONTACT TINA AT 850-508-1891 FOR

FURTHER INFORMATION ON THIS MATTER.

THANK YOU!

TINA GOFF, PRESIDENT

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

, Paradise Beach Club Rentals LP (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. 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. , Delaware State or Country of Formation 4. Federal Employer Identification Number: 5. Name of Registered Agent for Service of Process and Florida Street Address: United Corporate Services, Inc. 9200 South Dadeland Blvd., Ste. 506 Miami, Florida 33156 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. UNITED CORPORATE SERVICES, INC. Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 587 Manorwood Court 587 Manorwood Court Waterloo, Ontario N2K 3L7 Waterloo, Ontario N2K 3L7 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: Rentals In Florida 2 Inc. Name of General Partner: 587 Manorwood Court Street Address: Street Address: Waterloo, Ontario N2K 3L7 _____ Mailing Address:__ Mailing Address:_ Name of General Partner:______ Name of General Partner:_____ Street Address: Street Address:

______ Mailing Address: _____

Mailing Address:___

Name of Ge	neral Partner:	Page 1 of 2 Name of General Partner:	
Street Addre	ess:	Street Address:	
Mailing Add	dress:	Mailing Address:	_
11. Effective da (Effective date c	ite, if other than the date of filing: annot be prior to nor more than 90 days	ufter the date this document is filed by the Florida Department of State.)	_
Florida Departm the law of which	nent of State, by the Secretary of State or a it is organized.	ed, not more than 90 days prior to the delivery of this application to the other official having custody of the entity's records in the jurisdiction under	
	Drew	Groff, President	
		s stated herein are true and the individual is aware that false information titutes a third degree felony as provided for in s.817.155, F.S.	
÷	Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75 Page 2 of 2 Page 2 of 2	

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PARADISE BEACH CLUB RENTALS 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 TWENTY-FIRST DAY OF JANUARY, A.D.

2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PARADISE BEACH CLUB RENTALS LP" WAS FORMED ON THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2014.

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

15 JAN 22 PM 4: 50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5664734 8300

150077339

jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 2055005

DATE: 01-21-15

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