

B15000000169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

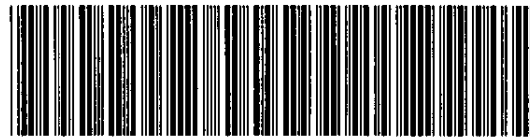
(Document Number)

Certified Copies _____

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Office Use Only



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06/08/15--01029--018 **1008.75

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15 JUN 19 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 19 2015

T. HAMPTON

29104-510

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southern Centers Associates 1, LP

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:

Randall Kella

Contact Person

Southern Centers Associates 1, LP

Firm/Company

1500 Cordova Road Suite #310

Address

Fort Lauderdale, Florida 33316

City, State and Zip Code

svea@southerncenters.com

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

For further information concerning this matter, please call:

Randall Kella at (**954**) **523-4008**

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

<input type="checkbox"/> \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	<input checked="" type="checkbox"/> \$1,008.75 Filing Fees and Certificate of Status	<input type="checkbox"/> \$1,052.50 Filing Fees and Certified Copy	<input type="checkbox"/> \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
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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

RECEIVED

15 JUN 19 PM 2: 31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 10, 2015

RANDALL KELLA
SOUTHERN CENTERS ASSOCIATES 1, LP
1500 CORDOVA RD - STE 310
FT LAUERDALE, FL 33316

SUBJECT: SOUTHERN CENTERS ASSOCIATES 1, LP
Ref. Number: W15000040163

We have received your document for SOUTHERN CENTERS ASSOCIATES 1, LP and your check(s) totaling \$1008.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Tammy Hampton
Regulatory Specialist III

Letter Number: 215A00012131

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

1. Southern Centers Associates 1, 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.

2. Delaware

State or Country of Formation

3. March 13, 1998

Date of Formation

4. Federal Employer Identification Number: 65-0820716

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

Randall Kella

1500 Cordova Road #310

Fort Lauderdale, Florida 33316

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.


Signature of Registered Agent

7. Principal Office:

Southern Centers Associates 1, LP

1500 Cordova Road #310

Fort Lauderdale, Florida 33316

8. Mailing Address:

Southern Centers Associates 1, LP

1500 Cordova Road #310

Fort Lauderdale, Florida 33316

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TALLAHASSEE, FLORIDA

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: Randall Kella, Pres.

Street Address: 1500 Cordova Road #310
Fort Lauderdale, Florida 33316

Mailing Address: same

Name of General Partner: Southern Centers

Street Address: Partnership Corp. P98-23472
1500 Cordova Road #310

Mailing Address: Fort Lauderdale, Florida 33316

Name of General Partner: _____

Street Address: _____

Mailing Address: _____

Name of General Partner: _____

Street Address: _____

Mailing Address: _____

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: June 4, 2015

(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 4th day of June, 20 15.



Signature of a general partner

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.817.155, 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

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUTHERN CENTERS ASSOCIATES I, 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 FIFTEENTH DAY OF JUNE, A.D. 2015.

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



2871094 8300

150921527

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2465284

DATE: 06-15-15