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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Euclid Depot, 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:

Andrew Kortesoja

Contact Person

Eenhoorn LLC

Firm/Company

231 W. Fulton St.

Address

Grand Rapids, MI 49503

City, State and Zip Code

akortesoja@eenhoorn.com

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

For further information concerning this matter, please call:

Andrew Kortesoja

Name of Contact Person

at ( 616 ) 855-3337

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

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

1. Euclid Depot, 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. State of Delaware

State or Country of Formation

3. November 4, 2015

Date of Formation

4. Federal Employer Identification Number: 47-5528048

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

Mike Karel

1603 Jefferson Ave

Miami Beach, FL 33139

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:

1603 Jefferson Ave

Miami Beach, FL 33139

8. Mailing Address:

Attn: Andrew Kortesoja

231 W. Fulton St.

Grand Rapids, MI 49503

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: Eenhoorn Euclid Depot GP, LLC

Name of General Partner: \_\_\_\_\_

Street Address: 231 W. Fulton St.

Street Address: \_\_\_\_\_

Grand Rapids, MI

Mailing Address: 231 W. Fulton St.

Mailing Address: \_\_\_\_\_

Grand Rapids, MI

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_

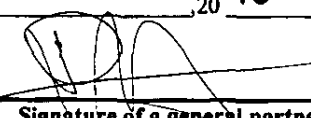
Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

11. Effective date, if other than the date of filing: \_\_\_\_\_  
(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 \_\_\_\_\_ day of \_\_\_\_\_, 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.

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

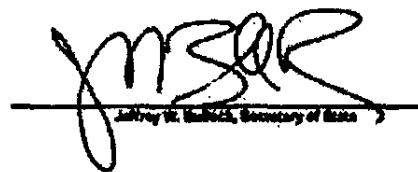
# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EUCLID DEPOT, 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 FOURTH DAY OF NOVEMBER, A.D. 2015.



  
Jeffrey W. Bullock, Secretary of State

5868099 8300

SR# 20150766964

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 10358698

Date: 11-04-15

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 08:42 AM 11/04/2015  
FILED 08:42 AM 11/04/2015  
SR 20150766964 - File Number 5868099

**STATE OF DELAWARE  
CERTIFICATE OF LIMITED PARTNERSHIP**

The Undersigned, desiring to form a limited partnership pursuant to the Delaware Revised Uniform Limited Partnership Act, 6 Delaware Code, Chapter 17, do hereby certify as follows:

1. Name. The name of the limited partnership formed hereby is:

Euclid Depot, LP

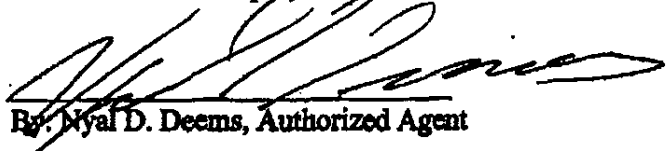
2. Registered Agent and Registered Office. The address of its registered office in the State of Delaware is 1000 N. West St., Ste. 1501, Wilmington, Delaware 19801. The name of the Registered Agent at such address is Delaware Corporations LLC.

3. General Partner. The name and mailing address of the general partner of the Partnership is:

Eenhoorn Euclid Depot, LLC  
231 W. Fulton  
Grand Rapids, MI 49503

The undersigned has executed this Certificate of Limited Partnership as of the 2nd day of November, 2015.

Eenhoorn Euclid Depot, LLC

  
By: Nyal D. Deems, Authorized Agent