# B170000000394

	<u>u</u>
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	€#) 
PICK-UP WAIT	☐ MAIL
(Business Entity Nan	ne)
(Document Number)	
•	
Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	
Special instructions to Filing Officer.	
Ì	
Office Use Orl	· · · · · · · · · · · · · · · · · · ·
Onice Use On	y



100306018671

11/28/17--01035--011 \*\*1052.50

A LABASSEL FLORIDA

S. WARREN DEC 0 1 2017

#### COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Estero Development Partners, L	P		
	d Partnership or Limited	Liability Limited Pa	irtnership
The enclosed application, certificate of status partnership to transact business in Florida. Please return all correspondence concerning to		register a foreign li	imited partnership or limited liability limited
Rebecca Losee Petitgout			
Contact Person		_	İ
Shumaker, Loop & Kendrick, LLP			
Firm/Company		_	
101 South Tryon Street, Suite 2200			
Address		<del>_</del>	
Charlotte, North Carolina 28280			
City, State and Zip Co	ode	_	
rpetitgout@slk-law.com			
E-mail address: (to be used for future annua	al report notification)	_	
For further information concerning this matter	er, please call:		}
Rebecca Losee Petitgout	704 at (	945-2173	
Name of Contact Person	<del></del>	nd Daytime Teleph	one Number
Enclosed is a check for the following amount	:		
\$1,000.00 Filing Fees \$1,008.75 Filing (\$965 Filing Fee and \$35 Registered Agent Fee)	ng Fees X \$1,052.50 File of and Certified	Copy Certif	1.25 Filing Fee, fied Copy, and ficate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADE Registration Sect Division of Corp P. O. Box 6327 Tallahassee, FL	tion orations	i

FL047 - 8/30/2017 Wolters Kluwer Online

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

1. Estero Development Partners, LP			<u>_</u>		
(Name of Limited Partnership	I imited Partnership	Limited Partnership, which must include suff Limited, L.P., LP, or Ltd. ted Liability Limited Partnership, L.L.L.P. or L			
If name unavailable, name under which	the limited partnership business in Florida; m	or limited liability limited partnership proposesust contain acceptable suffix.	s to registe	er to tra	insact
2. North Carolina		3			
State or Country of	η	Date of Formation			
4. Federal Employer Identification Nu	mber: 82-0713252				
5. Name of Registered Agent for Servi		ida Street Address:			
C T Corporation System	1				
1200 South Pine Island Road	1				
Plantation, Florida 33324	<u></u> 1				
of all statutes relative to the proper t	G T Corporation Syste	ee to act in this capacity. I further agree to conce of my duties, and I am familiar with and acc Nathan Giffin, Assistant Secretary Registered Agent	ept the ob	17	visions rs of
7. Principal Office:	.	. Mailing Address:	:: <u>:</u> :-	40.	11
725 Cherry Road, Suite 3234		725 Cherry Road, Suite 3234		28	;
Rock Hill, South Carolina 29732	-	Rock Hill, South Carolina 29732	1777	PH	
			9350 1	12: 42	
9. If limited partnership is a limited l	 	rship, check box.		12	
10. Name, principal office address, as	1				
Name of General Partner: Estero De	evelopments, LLC	Name of General Partner:			
Name of General Partner:	Suite 3234				
Street Address:	1	Street Address:			
Rock Hill, South	Carolina 29732		<u> </u>		
Mailing Address: 725 Cherry Road	Suite 3234	Mailing Address:			_
Rock Hill, South	Carolina 29732		_		
Name of General Partner:		Name of General Partner:			<u> </u>
Street Address:		Street Address:	<u> </u>		
Mailing Address:					
	Po	ore Laf 2			

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
1. Effective date, if other than the date	of filing:
Effective date cannot be prior to nor more  Note: If the date inserted in this block does  document's effective date on the Departme	than 90 days after the date this document is filed by the Florida Department of State.) sont meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Florida Department of State, by the Secreta he law of which it is organized.	ly authenticated, not more than 90 days prior to the delivery of this application to the ary of State or other official having custody of the entity's records in the jurisdiction under
Signed this day of	f November ,20 17
nghed this day or	Estero Developments, LLC
B <b>y</b> ∵	Signature of a general partner Kevin Lee Burrell, Manager
	ns that the facts stated herein are true and the individual is aware that false information tof State constitutes a third degree felony as provided for in s.817.155, F.S.
Filing Fees: Certified Copy (options	
Certificate of Status (ön	ational): \$8.75

Page 2 of 2



## NORTH CAROLINA Department of the Secretary of State

### CERTIFICATE OF EXISTENCE (Limited Partnership)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

### ESTERO DEVELOPMENT PARTNERS, LP

is a limited partnership formed on the 27<sup>th</sup> day of November, 2017 in North Carolina pursuant to Chapter 59 of the North Carolina General Statutes. Furthermore,

### ESTERO DEVELOPMENT PARTNERS, LP

filed a Certificate of Limited Partnership in my office on the 27<sup>th</sup> day of November 2017

I FURTHER certify that the aforesaid limited partnership has not filed a Certificate of Cancellation with this office as of the date set forth hereunder.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 27th day of November, 2017.

Elaine & Marshall

Secretary of State

Certification# 101374539-1 Reference# 14105881- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification