B18000000046

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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K. SALY
FEB 23 2018

file Secund

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 081658 5174517

AUTHORIZATION : [signature]

COST LIMIT : $ 1000.00

ORDER DATE : February 22, 2018

ORDER TIME : 2:44 PM

ORDER NO. : 081658-005

CUSTOMER NO: 5174517

FOREIGN FILINGS

NAME: TOVAH REALTY (LB MCLEOD COMMERCE CENTER FLORIDA) ADA COMPLIANT LIMITED PARTNERSHIP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tovah Realty (LB McLeod Commerce Center Florida) ADA Compliant Limited Partnership
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:

Fred Tkalec
Contact Person

Dalfen America Corp.
Firm/Company

4444 Ste Catherine Street West, Suite 100
Address

Westmount, Quebec, Canada H3Z 1R2
City, State and Zip Code

ftkalec@dalfen.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danita Swider at (312) 364-1622
Name of Contact Person — 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

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TALLAHASSEE, FLORIDA

1. Tovah Realty (LB McLeod Commerce Center Florida) ADA Compliant Limited Partnership

(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. January 12, 2018
Date of Formation

4. **Federal Employer Identification Number:** 82-4052719

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

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

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.*

Corporation Service Company
By: _____
Signature of Registered Agent
Roxanne Turner
Asst. Vice President

7. **Principal Office:**

4444 Ste Catherine Street West, Suite 100

Westmount, Quebec

Canada H3Z 1R2

8. **Mailing Address:**

4444 Ste Catherine Street West, Suite 100

Westmount, Quebec

Canada H3Z 1R2

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: LB McLeod Commerce Center Florida GP LLC
Street Address: 4444 Ste Catherine Street West, Suite 100
Westmount, Quebec, Canada H3Z 1R2
Mailing Address: 4444 Ste Catherine Street West, Suite 100
Westmount, Quebec, Canada H3Z 1R2

Name of General Partner: _____
Street Address: _____
Mailing Address: _____

Name of General Partner: _____
Street Address: _____
Mailing Address: _____

Name of General Partner: _____
Street Address: _____
Mailing Address: _____

Name of General Partner: _____
Street Address: _____
Mailing Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 **21st** day of **February**, 20 **18**

_____
Signature of a general partner

The individual signing this document affirms 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**

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOVAH REALTY (LB MCLEOD COMMERCE CENTER FLORIDA) ADA COMPLIANT LIMITED PARTNERSHIP" 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-SECOND DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOVAH REALTY (LB MCLEOD COMMERCE CENTER FLORIDA) ADA COMPLIANT LIMITED PARTNERSHIP" WAS FORMED ON THE TWELFTH DAY OF JANUARY, A.D. 2018.

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

FILED
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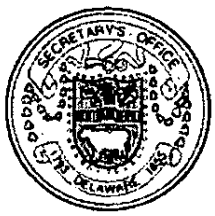
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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SR# 20181243200

Authentication: 202196929

Date: 02-22-18

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