

B19000000103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL *

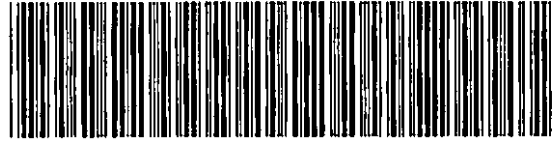
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800311194338

04/17/18--01012--018 **875.00

04/06/18--01015--018 **125.00

FILED
2018 APR 17 10 23 AM
FBI - MEMPHIS

4/16/18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2018

MAXIMILLIAN AMSTER
1700 S MACDILL AVE SUITE 340
TAMPA, FL 33629

SUBJECT: VERIDIS, LP
Ref. Number: W18000033207

We have received your document for VERIDIS, LP and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FOREIGN LP. Please complete and return the enclosed blank form(s).

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.

There is a balance due of \$875.00.

Please return your document, along with 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.

Dionne M Scott
Regulatory Specialist II

Letter Number: 618A00007061

2018 APR 17 2:39 PM

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Document # 18000033207

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Veridis, 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:

Maximillian Amster

Contact Person

Veridis GP LLC

Firm/Company

1700 S MacDill Ave Suite 240

Address

Tampa, FL 33629

City, State and Zip Code

max@veridismgmt.com

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

For further information concerning this matter, please call:

Maximillian Amster

at (772) 713-7127

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

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

1. Veridis, 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. 03/01/2018

Date of Formation

4. Federal Employer Identification Number. 38-4068935

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

Maximillian Amster

1700 S MacDill Ave Suite 240

Tampa, FL 33629

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:

1700 S. MacDill Ave

Suite 240

Tampa, FL 33629

8. Mailing Address:

1700 S. MacDill Ave

Suite 240

Tampa, FL 33629

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: Veridis GP LLC

Name of General Partner:

Street Address: 1700 S. MacDill Ave Suite 240

Street Address:

Tampa, FL 33629

Mailing Address: 1700 S. MacDill Ave Suite 240

Mailing Address:

Tampa, FL 33629

Name of General Partner:

Name of General Partner:

Street Address:

Street Address:

Mailing Address:

Mailing Address:

Document # 18000033207

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 12 day of April, 2018



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

18000033207
APR 12 2018
FILED

Delaware

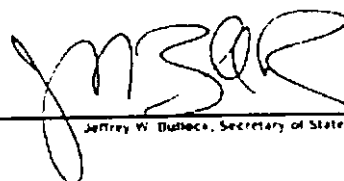
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "VERIDIS, LP" IS DULY FORMED UNDER THE
LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE SEVENTH DAY OF MARCH, A.D. 2018.

2018 MAR 17 10 23 AM
DELAWARE




Jeffrey W. Bullock, Secretary of State

6778067 8300

SR# 20181621930

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

Authentication: 202274896

Date: 03-07-18