

Division of Corporations

**B18000165933/149**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H18000165933 3)))



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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please!\*\***

Email Address: \_\_\_\_\_

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2018 JUN -4 PM 1:11

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32399

**FLORIDA/FOREIGN LP/LLLP  
Centrecorp Management Services, LLLP**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$1,008.75

Electronic Filing Menu

Corporate Filing Menu

Help

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JUN 05 2018

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

1. CENTRECOP MANAGEMENT SERVICES, LLLP

(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. 12/08/2009

Date of Formation

4. Federal Employer Identification Number 98-0644636

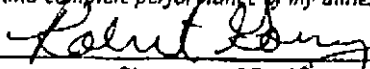
5. Name of Registered Agent for Service of Process and Florida Street Address:

Corporate Creations Network Inc.

11380 Prosperity Farms Road, #221E

Palm Beach Gardens, FL 33410

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.



**Robert Gomez, Special Secretary**

Signature of Registered Agent

7. Principal Office:

400 Clematis Street, Ste. 201

West Palm Beach, FL 33401

8. Mailing Address:

2851 John Street, Ste. One

Markham, Ontario, Canada L3R 5R7

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: Centrecorp Management Services GP, Inc.

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

Street Address: 2851 John Street, Ste. One

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

Markham, Ontario L3R 5R7

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

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

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.)*

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 31st day of May, 2018

Per: [Signature]  
 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

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CENTRECORP MANAGEMENT SERVICES, LLLP" 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 THIRTY-FIRST DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CENTRECORP MANAGEMENT SERVICES, L.L.P." WAS FORMED ON THE EIGHTH DAY OF DECEMBER, A.D. 2009.

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



4762074 8300

SR# 20184730655

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202796572

Date: 05-31-18



June 1, 2018

FLORIDA DEPARTMENT OF STATE  
CORPORATE CREATIONS INTERNATIONAL INC  
Division of Corporations

SUBJECT: CENTRECORP MANAGEMENT SERVICES, LLLP  
REF: W18000051499

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

If you have any further questions concerning your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist III  
Registration Section

FAX Aud. #: H18000165933  
Letter Number: 318A00011370

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA