BIECOCCOIRE

(Requestor's Name)
(Address)
(Addless)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





000315819110

18 JUL 12 PH 4: 1

-112/120a

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 292997 4302815

AUTHORIZATION :

COST LIMIT : \$ 4.061.25

ORDER DATE : July 10, 2018

ORDER TIME : 10:23 AM

ORDER NO. : 292997-015

CUSTOMER NO: 4302815

FOREIGN FILINGS

NAME: NNN PANAMA CITY FL II OWNER LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

___ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: NNN Panama City FL II Owner L	P	
Name of Foreign Limited	Partnership or Limited Liability Li	mited Partnership
The enclosed application, certificate of status at partnership to transact business in Florida. Please return all correspondence concerning this		foreign limited partnership or limited liability limited
c/o Apollo Global Management, LLC		
Contact Person	· · · · · · · · · · · · · · · · · · ·	
NNN Panama City FL II Owner LP		
Firm/Company		
9 West 57th Street		
Address		
New York, NY 10019		
City. State and Zip Code	2	
E-mail address: (to be used for future annual	report notification)	
For further information concerning this matter,	please call:	
	at (
Name of Contact Person	Area Code and Daytime	e Telephone 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) \$1,008.75 Filing and Certificate of Status		\$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	<u>:</u>

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

L. NNN Panama City			_
Acceptable Limited I	Partnership suffixes: Limited Partnership	y Limited Partnership, which must include suffix) o, Limited, L.P., LP, or Ltd. mited Liability Limited Partnership, L.L.L.P. or LLLI	·
If name unavailable		nip or limited liability limited partnership proposes to must contain acceptable suffix.	— register to transact
2 Delaware		3. 06/04/2018	
-	ate or Country of Formation	Date of Formation	_
4. Federal Employe	r Identification Number		
5. Name of Register	ed Agent for Service of Process and Fl	orida Street Address:	
Corporation Service	•		
1201 Hays Street			
Tallahassee, Fl. 323	01		
of all statutes rela	ative to the proper and complete performation Service Consistered agent. By: LLCCLL	4 1 1 2 1 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
7. Principal Office: 8. N		8. Mailing Address:	
c/o Apollo Global Management, LLC		c/o Apollo Global Management, LLC	
9 West 57th Street		9 West 57th Street	
New York, NY 10019 New		New York, NY 10019	_
9. If limited partne	ership is a limited liability limited partr	nership, check box.	
10. Name, principa	al office address, and mailing address o	f each general partner:	
Name of Genera	l Partner:	Name of General Partner:	
Street Address:	de Amella Clabal Management 1 I C	Street Address:	
 -	9 West 57th St., New York, NY 10019		
Mailing Address	S:	Mailing Address:	
Name of Genera	al Partner:	Name of General Partner:	
Street Address:		Street Address:	
Mailing Address	s:	Mailing Address:	

Name of General Partnert	eral Partner: Name of General Partner;	
Street Address:	Street Address:	
Mailing Address:	Mailing Address:	
11. Effective date, if other than the date	of filing:	
	than 90 days after the date this document is filed by the Florida Department of State.) not meet the applicable statutory filing requirements, this date will not be listed as the nt of State's records.	
	ly authenticated, not more than 90 days prior to the delivery of this application to the rry of State or other official having custody of the entity's records in the jurisdiction under	
Signed this 4 day e	NNN Owner GP II LLC, a Delaware limited liability company	
	Signature of a general partner By: Pamela Santos, Authorized Person as that the facts stated herein are true and the individual is aware that false information of State constitutes a third degree felony as provided for in s.817.155, F.S.	
Filing Fees: Certified Copy (option Certificate of Status (o		

Page 2 of 2

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NNN PANAMA CITY FL II OWNER 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 TENTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NNN PANAMA CITY FL II OWNER LP" WAS FORMED ON THE FOURTH DAY OF JUNE, A.D. 2018.

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

Authentication: 203037290

Date: 07-10-18