B18000000266

(F	Requestor's Name)
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PICK-UP	☐ WAIT ☐ MAIL
(E	Business Entity Name)
([Document Number)
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K. SALY SEP 28 2018

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500				
ACCOUNT NO. : 12000000195				
REFERENCE : 415389 4320702				
AUTHORIZATION :				
COST LIMIT : \$1,000.00				
ORDER DATE: September 27, 2018				
ORDER TIME : 1:30 PM				
ORDER NO. : 415389-015				
CUSTOMER NO: 4320702				
FOREIGN_FILINGS				
NAME: FOXHILL OPPORTUNITY FUND, L.P.				
XXXX QUALIFICATION (TYPE: <u>LL</u>)				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Emily Croft EXT# 62925				

EXAMINER:

CORPORATION SERVICE COMPANY

COVER LETTER

Division of Corporations	
SUBJECT: Foxhill Opportunity Fund, L.P.	
	ership or Limited Liability Limited Partnership
The enclosed application, certificate of status and fee partnership to transact business in Florida. Please return all correspondence concerning this matter.	es are submitted to register a foreign limited partnership or limited liability limited ter to:
Neil Weiner	
Contact Person	
Foxhill Capital Partners, LLC	
Firm/Company	
Loggerhead Plaza, 14244 US Hwy 1, Suite 240	
Address	
Juno Beach, Florida 33408	
City, State and Zip Code	
neil@foxhillcapital.com	
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please	e call:
Neil Weiner	at (561) 335-5330
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
S1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) \$1,008.75 Filing Fees and Certificate of Status	S1,052.50 Filing Fees S1.061.25 Filing Fee, and Certified Copy 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

18 SEP 27 AM 2:22

L Foxhill Opportunity Fund, L.P.

(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 L.L.P.

If name unavailable, name under which the limited a		
business in 1	artnership or limited liability limited partnership proposes to register to transact Florida; must contain acceptable suffix.	
2. Delaware	3. 09/23/2005	
State or Country of Formation	Date of Formation	
4. Federal Employer Identification Number: 20-351	12767	
5. Name of Registered Agent for Service of Process	and Florida Street Address:	
Corporation Service Company		
1201 Hays Street		
Tallahassee, FL 32301		
of all statutes relative to the proper and complete p my position as registered agent. Corporation Sen By: W	at and agree to act in this capacity. I further agree to comply with the provisions of performance of my duties, and I am familiar with and accept the obligations of vice Company Emily Croft gnature of Registered Agent Asst. Vice President	
7. Principal Office:	8. Mailing Address:	
Loggerhead Plaza	Loggerhead Plaza	
14244 US Hwy 1, Suite 240	14244 US Hwy 1, Suite 240	
Juno Beach, Florida 33408	Juno Beach, Florida 33408	
	Tano Beach, 1 (Mida 35406	
9. If limited partnership is a limited liability limited		
	d partnership, check box.	
	d partnership, check box. dress of each general partner:	
Name, principal office address, and mailing address Name of General Partner: Powerhead Plaza 14744 US Flore 14744 US Flo	d partnership, check box. dress of each general partner: Name of General Partner:	
10. Name, principal office address, and mailing add	d partnership, check box. dress of each general partner: LC Name of General Partner:	
Name, principal office address, and mailing address. Name of General Partner: Street Address: Loggerhead Plaza, 14244 US Hy Juno Beach, Florida 33408	d partnership, check box. dress of each general partner: LC Name of General Partner: vy 1, Ste.240 Street Address:	
Name, principal office address, and mailing address and mailing address. Name of General Partner: Foxhill Capital (GP), LI	d partnership, check box. dress of each general partner: C Name of General Partner: vy 1, Ste.240 Street Address: wy 1, Ste.240 Mailing Address:	
Name, principal office address, and mailing address. Name of General Partner: Street Address: Loggerhead Plaza, 14244 US Hy Juno Beach, Florida 33408 Loggerhead Plaza, 14244 US Hy Juno Beach, Florida 33408	d partnership, check box. dress of each general partner: LC Name of General Partner: vy 1, Ste.240 Street Address: wy 1, Ste.240 Mailing Address:	
Street Address: Loggerhead Plaza, 14244 US Hv Juno Beach, Florida 33408 Mailing Address: Loggerhead Plaza, 14244 US Hv Juno Beach, Florida 33408 Name of General Partner:	d partnership, check box. dress of each general partner: C Name of General Partner: vy 1, Ste.240 Street Address: wy 1, Ste.240 Mailing Address:	
Name of General Partner: Street Address: Loggerhead Plaza, 14244 US Hv Juno Beach, Florida 33408 Mailing Address: Loggerhead Plaza, 14244 US Hv Juno Beach, Florida 33408 Name of General Partner:	d partnership, check box. dress of each general partner: LC Name of General Partner: vy 1, Ste.240 Street Address: wy 1, Ste.240 Mailing Address: Name of General Partner:	

F/	LED
10 SEP 27	7 4.
SECRE ALLAMASSE	AH 2: 2-
LLAIMSSE	

Name of General Partner:	Name of General Partner:	- SSEE FLORIDA
Street Address:	Street Address:	
Mailing Address:	Mailing Address:	
11. Effective date, if other than the date of fiteffective date cannot be prior to nor more that Note: If the date inserted in this block does not document's effective date on the Department of	ling: n 90 days after the date this document is filed by the Flo meet the applicable statutory filing requirements, this d f State's records.	orida Department of State.) late will not be listed as the
12. Attached is a certificate of existence duly a Florida Department of State, by the Secretary of the law of which it is organized.	uthenticated, not more than 90 days prior to the delivery of State or other official having custody of the entity's re	of this application to the ecords in the jurisdiction under
Signed this day of Se	ptember .20 <u>2018</u>	
_	//////////	ger of Foxhill Capital GP, LLC, the meral partner of Applicant
	hat the facts stated herein are true and the individual is a State constitutes a third degree felony as provided for in	

Page 2 of 2

\$52.50

\$8.75

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FOXHILL OPPORTUNITY FUND, L.P." 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-SEVENTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FOXHILL OPPORTUNITY FUND, L.P." WAS FORMED ON THE TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2005.

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





Authentication: 203505271

Date: 09-27-18

4035260 8300 SR# 20186868808