B18000000274

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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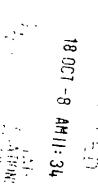
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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date: 10/8/2018

10/8/2018	- w: DW
Acc#I2016000007	2
LUXE AT 1820 LP	
11197191 line8	
Country of Destination: Number of Certs:	
Certified: Plain: COGS:	 File the registration of the LLC. File the registration of the LP.
Amount: \$ 1061.25	
	Acc#I2016000007 LUXE AT 1820 LP 11197191 line8 Country of Destination Number of Certs: Certified: Plain: COGS: COGS:

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

Luxe at 1820 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 o business in Florida; mus	r limited liability limited partnership proposes to register to transact t contain acceptable suffix.
_{2.} Delaware		_{3.} 10-02-2018
Sta	nte or Country of Formation	Date of Formation
4. Federal Employer	Identification Number:	
5. Name of Registers Joseph G. Lu	ed Agent for Service of Process and Florid	a Street Address:
1331 South k	Killian Drive, Suite A	GB
Lake Park, F	L 33403	
6. I hereby accept the of all statutes rela my position as regi	tive to the proper and complete performance istered agent.	of my duties, and I am familiar with and accept the obligations of my duties, and I am familiar with and accept the obligations of logistered Agent
7. Principal Office: 4890 W. Kent		Mailing Address: 890 W. Kennedy Blvd., Suite 240
Tampa, FL 33609 Tai		ampa, FL 33609
9. If limited partner	rship is a limited liability limited partners	nip, check box .
10. Name, principal	office address, and mailing address of ea	ch general partner:
Name of General	Partner: Luxe at 1820 GP LL	Name of General Partner:
Street Address:	4890 W Kennedy Blvd., #24	
	Tampa, FL 33609	
Manning Address	4890 W Kennedy Blvd., #24	O Mailing Address:
	Tampa, FL 33609	
Name of General	Partner:	Name of General Partner:
		Street Address:
Mailing Address	:	Mailing Address:

		Page 1 of 2
Name of Gene	eral Partner:	Name of General Partner:
Street Address	s:	Street Address:
Mailing Addr	ess:	Mailing Address:
12. Attached is a c	certificate of existence duly authenticated, not nt of State, by the Secretary of State or other o	the date this document is filed by the Florida Department of State.) It more than 90 days prior to the delivery of this application to the official having custody of the entity's records in the jurisdiction under
	day of October By: Luxe at 1820 GP	LLC
	ning this document affirm that the facts states	k, authorized person therein are true and the individual is aware that false information a third degree felony as provided for in s.817.155, F.S.
	Certified Copy (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

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

DELAWARE, DO HEREBY CERTIFY "LUXE AT 1820 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 FOURTH DAY OF OCTOBER, A.D. 2018.

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

Authentication: 203547561

Date: 10-04-18