

B19000000059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

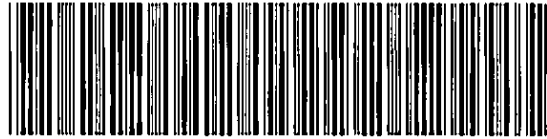
(Document Number)

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19 MAR 15 PM 4:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
MAR 21 2015

19 MAR 15 PM 1:55

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 678459 8084636

AUTHORIZATION :

COST LIMIT : \$ 1,000.00



ORDER DATE : March 8, 2019

ORDER TIME : 9:17 AM

ORDER NO. : 678459-005

CUSTOMER NO: 8084636

FOREIGN FILINGS

NAME: DATALO LIMITED PARTNERSHIP

XXXX QUALIFICATION (TYPE: LP)

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: _____



RESUBMIT

Please give original
submission date as file date.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 18, 2019

CSC / EMILY CROFT

SUBJECT: DATALO LIMITED PARTNERSHIP
Ref. Number: W19000026217

We have received your document for DATALO LIMITED PARTNERSHIP and the authorization to debit your account in the amount of \$1000.00. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L13000008547 "DATALO, LLC".

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 019A00005347

19 MAR 27 PM 1:50

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

FILED
19 MAR 15 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Datalo Limited Partnership

(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.

Datalo Canada LP

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. Ontario, Canada

State or Country of Formation

3. 03/07/2019

Date of Formation

4. Federal Employer Identification Number: _____

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

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

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.

Corporation Service Company

By: Emily Croft

Signature of Registered Agent

Emily Croft

Asst. Vice President

7. Principal Office:

7071 Bayview Ave., Suite PL12

Thornhill, Ontario

L3T 7Y8

8. Mailing Address:

7071 Bayview Ave., Suite PL12

Thornhill, Ontario

L3T 7Y8

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: Allan Oberman

Name of General Partner: Deborah Oberman

Address: 7071 Bayview Ave., Suite PL12

Street Address: 7071 Bayview Ave., Suite PL12

Thornhill, Ontario, L3T 7Y8

Thornhill, Ontario, L3T 7Y8

Mailing Address: _____

Mailing Address: _____

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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TALLAHASSEE, FLORIDA

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 7th day of March, 2019



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



Ontario

Ministry of Government and
Consumer Services

Ministère des Services gouvernementaux et
des Services aux consommateurs

Declaration Form 3
under the Limited Partnerships Act
Déclaration Formule 3
aux termes de la Loi sur les sociétés
en commandite

Page 1 of 2

Print clearly in CAPITAL LETTERS / Écrivez clairement en LETTRES MAJUSCULES

1. Declaration Type / Type de déclaration	A. ☒ New / Nouvelle	B. ☐ Name Change / Modification de la raison sociale	C. ☐ Change (other than name change) / Changement (autre que modification de la raison sociale)
	D. ☐ Renewal Without Name Change / Renouvellement sans modification de la raison sociale	E. ☐ Renewal With Name Change / Renouvellement avec modification de la raison sociale	F. ☐ Dissolution / Dissolution
			G. ☐ Withdrawal / Retrait
Enter the Business Identification Number (BIN) for all Declaration Types except Type A. / Entrez le n° d'identification de l'entreprise (NIE) pour tous les types de déclaration, sauf pour le type A.		BIN (Business Identification No.) / NIE N° d'identification de l'entreprise	

2. Firm Name / Raison sociale de la société en commandite

DATALO LIMITED PARTNERSHIP

3. Mailing Address
of Registrant
Adresse postale
de registrant

7071 BAYVIEW AVE. PL12
THORNHILL ONTARIO CANADA L3T 7Y8

4. Address of Principal Place of Business in Ontario / Adresse de l'établissement principal en Ontario

☒ Same as above / comme ci-dessus ☐ Extra-Provincial Limited Partnership without business address in Ontario / Société en commandite extraprovinciale sans établissement en Ontario

Street No. / N° de rue 7071	Street Name / Nom de la rue BAYVIEW AVE.	Suite No. / Bureau n° PL12
City / Town / Ville THORNHILL	Province / Province ONTARIO	Country / Pays CANADA
		Post. Code / Code postal L3T 7Y8

5. General Nature of Business / Nature générale de l'activité exercée

REAL ESTATE INVESTMENTS

6. Information Regarding General Partner(s) / Renseignements sur le ou les commandités

(A) Individual / Personne physique - Last Name / Nom de famille	First Name / Prénom	Middle Name / Autre prénom
OBERMAN	ALLAN	
(B) Corporation, Partnership etc. / Personne morale, société en nom collectif etc. - Name / Raison sociale		
Ontario Corporation Number / N° matricule de la personne morale en Ontario		
Street No. / N° de rue 7071	Street Name / Nom de la rue BAYVIEW AVE.	Suite No. / Bureau n° PL12
City / Town / Ville THORNHILL	Province / Province ONTARIO	Country / Pays CANADA
		Post. Code / Code postal L3T 7Y8
Signature of General Partner or Attorney for the General Partner / Signature du commanditaire ou de son procureur		
Check if signing as attorney on behalf of the general partner pursuant to s. 32 of the Limited Partnerships Act / Cochez la case ci-contre si le signataire est le procureur du commanditaire (art. 32 de la Loi)		
☒		
For a new Declaration, name change or renewal, item 6 must be completed and signed by all the general partners or their attorneys. If there is more than one general partner, set out the total number of partners in the box and attach additional schedule(s). / Pour une nouvelle Déclaration, une modification de la raison sociale ou un renouvellement, il faut remplir la section 6 pour chaque commanditaire, et chaque commanditaire ou son procureur doit signer la section 6. Si il y a plus d'un commanditaire, entrez le nombre total de commanditaires dans la case ci-contre et remplissez et joignez une ou des annexes.		
Number of General Partners / Nombre de commandités 2		

7. Jurisdiction of Formation / Territoire d'origine

ONTARIO

Extra-Provincial Limited Partnership Carrying on Business in Ontario / Société en commandite extraprovinciale menant des activités en Ontario

8. Information Regarding Attorney/Representative for an Extra-Provincial Limited Partnership - (Does not apply to limited partnerships formed in another Canadian jurisdiction that have an office or other place of business in Ontario) / Renseignements sur le procureur / représentant de la société en commandite extraprovinciale - (Ne s'applique pas aux sociétés en commandite d'un autre territoire canadien qui ont un établissement en Ontario)

Power of Attorney - Check the box to confirm there is an executed Power of Attorney (Form 4) appointing the person/corporation listed below to be the attorney and representative in Ontario. The attorney/representative is required to keep the executed Form 4 available for inspection at the address set out below. / Procuration - Cochez la case ci-contre pour confirmer qu'il y a une Procuration signée (Formule 4) nommant la personne physique ou morale indiquée ci-dessous à titre de procureur et représentant en Ontario. Celui-ci doit tenir la Formule 4 signée à disposition aux fins d'inspection à l'adresse ci-dessous.			☐
Attorney / Representative - Procureur / Représentant			
(A) Individual / Personne physique - Last Name / Nom de famille	First Name / Prénom	Middle Name / Autre prénom	
(B) Corporation, Partnership etc. / Personne morale, société en nom collectif etc. - Name / Raison sociale			
Ontario Corporation Number / N° matricule de la personne morale en Ontario			
Street No. / N° de rue	Street Name / Nom de la rue	Suite No. / Bureau n°	
City / Town / Ville	Province / Province	Country / Pays	
		Postal Code / Code postal	

BIN/EIN: 290238227
NAME: DATALO LIM
REG/ENR: 2019-03-07
EXP/EXP: 2024-03-06

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19 MAR 15 PM 4:15
STATE
TALLAHASSEE, FLORIDA

SCHEDULE - To Form 3, Declaration Under the Limited Partnerships Act
ANNEXE à la Formule 3 - Déclaration Loi sur les sociétés en commandite
Information Regarding General Partners
Renseignements sur le ou les commandités

Page 2 of 2

Only complete this schedule if the limited partnership has more than one general partner. All general partners must be listed and must sign a new declaration, name change, or renewal. Complete as many Schedules as required. A change other than a name change, withdrawal or dissolution must be signed by at least one general partner.

Ne remplissez cette Annexe que si la société en commandite a plus d'un commandité. Tous les commandités doivent être déclarés et chacun doit signer la Déclaration si vous remplissez une nouvelle déclaration, une modification de la raison sociale ou un renouvellement. Utilisez d'autres annexes si nécessaire. Si vous remplissez une Déclaration pour un changement autre qu'une modification de la raison sociale, ou pour un retrait ou une dissolution, la Déclaration doit être signée par au moins un commandité.

BIN (Business Identification No) / NIE (N° d'identification de l'entreprise)

Firm Name / Raison sociale de la société en commandite

DATALO LIMITED PARTNERSHIP

9. Information Regarding General Partner(s) / Renseignements sur le ou les commandités

(A) Individual / Personne physique - Last Name / Nom de famille First Name / Prénom		Middle Name / Autre prénom	
OBERMAN		DEBORAH	
(B) Corporation, Partnership etc. / Personne morale, société en nom collectif etc. - Name / Raison sociale		Ontario Corporation Number N° matricule de la personne morale en Ontario	
Street No / N° de rue	Street Name / Nom de la rue	Suite No / Bureau n°	
7071	BAYVIEW AVE.	PL12	
City / Town / Ville	Province / Province	Country / Pays	Postal Code / Code postal
THORNHILL	ONTARIO	CANADA	L3T 7Y8
Signature of General Partner or Attorney for the General Partner/ Signature du commandité ou de son procureur		Check if signing as attorney on behalf of the general partner pursuant to s. 32 of the Limited Partnerships Act	
☒		☒	
Print Name of Signatory / Nom du signataire en lettres moulées		Cochez la case si le signataire est le procureur du commandité (art. 32 de la Loi)	
MARK FEIGENBAUM			

(A) Individual / Personne physique - Last Name / Nom de famille First Name / Prénom		Middle Name / Autre prénom	
(B) Corporation, Partnership etc. / Personne morale, société en nom collectif etc. - Name / Raison sociale		Ontario Corporation Number N° matricule de la personne morale en Ontario	
Street No / N° de rue	Street Name / Nom de la rue	Suite No / Bureau n°	
City / Town / Ville	Province / Province	Country / Pays	Postal Code / Code postal
Signature of General Partner or Attorney for the General Partner/ Signature du commandité ou de son procureur		Check if signing as attorney on behalf of the general partner pursuant to s. 32 of the Limited Partnerships Act	
☒		☐	
Print Name of Signatory / Nom du signataire en lettres moulées		Cochez la case si le signataire est le procureur du commandité (art. 32 de la Loi)	

(A) Individual / Personne physique - Last Name / Nom de famille First Name / Prénom		Middle Name / Autre prénom	
(B) Corporation, Partnership etc. / Personne morale, société en nom collectif etc. - Name / Raison sociale		Ontario Corporation Number N° matricule de la personne morale en Ontario	
Street No / N° de rue	Street Name / Nom de la rue	Suite No / Bureau n°	
City / Town / Ville	Province / Province	Country / Pays	Postal Code / Code postal
Signature of General Partner or Attorney for the General Partner/ Signature du commandité ou de son procureur		MINISTRY USE ONLY - RÉSERVE AU MINISTÈRE	
☒			
Print Name of Signatory / Nom du signataire en lettres moulées			
Check if signing as attorney on behalf of the general partner pursuant to s. 32 of the Limited Partnerships Act			
Cochez la case si le signataire est le procureur du commandité (art. 32 de la Loi)			
☐			

BIN/EIN: 290258227
NAME/
NOM: DATALO LIM
REG/ENR: 2019-03-07
EXP/EXP: 2024-03-06

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STATE
TALLAHASSEE, FLORIDA

Request ID: 022814476
Transaction ID: 71086147
Category ID: (B)CC/E

Province of Ontario
Ministry of Government Services

Date Report Produced: 2019/03/12
Time Report Produced: 09:48:28
Page: 1

Certified a true copy of the record on the Ontario Business
Information System with respect to this registration/declaration
under the *Business Names Act/Limited Partnerships Act*.



Registrar
Ministry of Government Services
Toronto, Ontario

LIMITED PARTNERSHIPS REPORT

Firm name registered under the *Limited Partnerships Act*

DATALO LIMITED PARTNERSHIP

Business Identification Number

290258227

Business Type

LIMITED PARTNERSHIP

Mailing Address

7071 BAYVIEW AVE

No. PL12
THORNHILL
ONTARIO
CANADA, L3T 7Y8

Address of Principal Place of Business in Ontario

7071 BAYVIEW AVE

No. PL12
THORNHILL
ONTARIO
CANADA, L3T 7Y8

General Nature of Business

REAL ESTATE INVESTMENTS

Jurisdiction of Formation

ONTARIO

Declaration Date

2019/03/07

Expiry Date

2024/03/06

Renewal Date

NOT APPLICABLE

Change Date(s)

NOT APPLICABLE

Last Document Filed

NEW DECLARATION

Dissolution/Withdrawal Date

NOT APPLICABLE

Last Document Filed Date

2019/03/07

Current Partnership Business Names Exist:

NO

Expired Partnership Business Names Exist:

NO

Former Names

NOT APPLICABLE

Date of Name Change

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19 MAR 15 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Request ID: 022814476
Transaction ID: 71086147
Category ID: (B)CC/E

Province of Ontario
Ministry of Government Services

Date Report Produced: 2019/03/12
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Registrar
Ministry of Government Services
Toronto, Ontario

LIMITED PARTNERSHIPS REPORT

Firm name registered under the *Limited Partnerships Act*

DATALO LIMITED PARTNERSHIP

Business Identification Number

290258227

Business Type

LIMITED PARTNERSHIP

Information Regarding General Partner(s)

Name (Individual/Corporation/Other)

OBERMAN,
ALLAN

Address

7071 BAYVIEW AVE

No. PL12
THORNHILL
ONTARIO
CANADA, L3T 7Y8

Name of Signatory

EIGENBAUM, MARK

Power of Attorney

YES

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19 MAR 15 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name (Individual/Corporation/Other)

OBERMAN,
BORAH

Address

7071 BAYVIEW AVE

No. PL12
THORNHILL
ONTARIO
CANADA, L3T 7Y8

Name of Signatory

EIGENBAUM, MARK

Power of Attorney

YES

Request ID: 022814476
Transaction ID: 71086147
Category ID: (B)CC/E

Province of Ontario
Ministry of Government Services

Date Report Produced: 2019/03/12
Time Report Produced: 09:48:28
Page: 3

Certified a true copy of the record on the Ontario Business Information System with respect to this registration/declaration under the *Business Names Act/Limited Partnerships Act*.



Registrar
Ministry of Government Services
Toronto, Ontario

LIMITED PARTNERSHIPS REPORT

Firm name registered under the *Limited Partnerships Act*

DATALO LIMITED PARTNERSHIP

Business Identification Number

290258227

Business Type

LIMITED PARTNERSHIP

Former Limited Partnership Names will only be displayed for Declarations registered on or after April 1, 1994.

This Report sets out the most recent information registered on or after April 1, 1994 and recorded in the Ontario Business Information System as of the last business day.

The Issuance of this certified report in electronic form is authorized by the Ministry of Government Services.

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19 MAR 15 PM 4:15
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TALLAHASSEE, FLORIDA