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**Florida Department of State
Division of Corporations
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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: _____

**FLORIDA/FOREIGN LP/LLP
McLaughlin Four L.P.**

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

D SCOTT

JUN - 5 2019

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

1. MCLAUGHLIN FOUR 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 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. NEW YORK

State or Country of Formation

3. MARCH 07, 2018

Date of Formation

4. Federal Employer Identification Number: _____

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

Corporate Creations Network Inc.11380 Prosperity Farms Road #221EPalm 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.


 Signature of Registered Agent
Jenisa Irizarry, Special Secretary

7. Principal Office:

Riverplace Tower1301 Riverplace Blvd., Suite 800Jacksonville, FL 32207

8. Mailing Address:

Riverplace Tower1301 Riverplace Blvd., Suite 800Jacksonville, FL 322079. 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: James J. McLaughlin

Name of General Partner: _____

 Street Address: Riverplace Tower
1301 Riverplace Blvd., Ste 800
Jacksonville, FL 32207

Street Address: _____

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 4th day of June, 2019

James D. McLaughlin

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:
Certified Copy (optional):
Certificate of Status (optional):

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
\$52.50
\$8.75

**State of New York
Department of State } ss:**

I hereby certify, that MCLAUGHLIN FOUR L.P. a New York Limited Partnership, filed a Certificate of Limited Partnership pursuant to the Partnership Law, on 03/07/2019, and that the Limited Partnership is existing so far as shown by the records of the Department. I further certify the following:

A Certificate of Publication of MCLAUGHLIN FOUR L.P. was filed on 06/22/2018.

I further certify, that no other documents have been filed by such Limited Partnership.



Witness my hand and the official seal
of the Department of State at the City
of Albany, this 03rd day of June
two thousand and nineteen.

Whitney Clark

Whitney Clark
Deputy Secretary of State

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