

B19000000190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

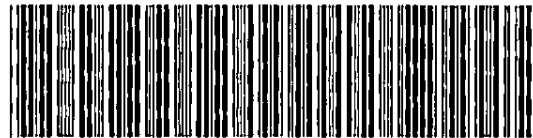
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/13/19--01010--020 **1000.00

2019 JUL 10 PM 12:31
CLERK OF STATE
TALLAHASSEE, FL 32399

FILED

JUL 11 2019

M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2019

QUINN LAHIFF
4905 W LAUREL STREET, STE 100
TAMPA, FL 33607

SUBJECT: AK PRIVATE CAPITAL, LLLP
Ref. Number: W19000059862

We have received your document for AK PRIVATE CAPITAL, LLLP and check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The GP listed does not have an active registration on the records of the Florida Department of State, Division of Corporations. Also, the GP principal address must be a Street Address and not a post office box. The mailing address can be a post office box, but not the Principal address, just fyi.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon
Regulatory Specialist II Supervisor

Letter Number: 719A00012932

RECEIVED
JUL 10 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AK Private Capital, LLLP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.

Please return all correspondence concerning this matter to:

Quinn LaHiff

Contact Person

Blessed Day Manager, LLC

Firm/Company

4905 W Laurel Street STE 100

Address

Tampa, FL 33607

City, State and Zip Code

quinn@aklllp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Quinn LaHiff

at (813) 4746443

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) ☐ \$1,008.75 Filing Fees and Certificate of Status ☐ \$1,052.50 Filing Fees and Certified Copy ☐ \$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

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

1. AK Private Capital, LLLP

(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 partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Delaware

3. April 21, 2014

State or Country of Formation

Date of Formation

4. Federal Employer Identification Number 37-1759259

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

Blessed Day Manager, LLC

4905 W Laurel Street STE 100

Tampa, FL 33607

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

7. Principal Office:

4905 W Laurel Street STE 100

Tampa, FL 33607

8. Mailing Address:

PO Box 18131

Tampa, FL 33679

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: Managing AK Capital, Inc.,

Name of General Partner: _____

Street Address: 4905 W Laurel Street STE 100

Street Address: _____

Tampa, FL 33607

Mailing Address: PO Box 18131

Mailing Address: _____

Tampa, FL 33679

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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SECRETARY OF STATE
MAIL ROOM

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Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

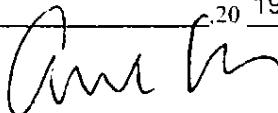
11. Effective date, if other than the date of filing: _____

(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 10th day of June, 2019



Signature of a general partner

Anil Kottoor, President, AK Management, General Partner of AK Private Capital, LLLP

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

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SECRETARY OF STATE
AT: TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AK PRIVATE CAPITAL, LLLP" 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 FIFTH DAY OF JUNE, A.D. 2019.



5519762 8300

SR# 20195257086

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202969121

Date: 06-05-19