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October 21, 2019

CSC

SUBJECT: A & A REAL ESTATE ASSOCIATES, L.P.

Ref. Number: W19000093111

We have received your document for A & A REAL ESTATE ASSOCIATES, L.P. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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.

Letter Number: 019A00021651

Yvette Scott Document Specialist II

www.sunbiz.org

October 21, 2019

CSC

RESUBM
Please give original submission date as file

SUBJECT: A & A REAL ESTATE ASSOCIATES, L.P.

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Yvette Scott Document Specialist II

www.sunbiz.org

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 017011 8266176

AUTHORIZATION : Spelle &

COST LIMIT : \$'1900.00

ORDER DATE: October 18, 2019

ORDER TIME : 4:05 PM

ORDER NO. : 017011-005

CUSTOMER NO: 8266176

#### FOREIGN FILINGS

NAME: A & A REAL ESTATE ASSOCIATES,

L.P.

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

#### COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJI	A & A Real Estate Associates,	L.P.						
30001	Name of Foreign Limite	d Partnersh	nip or Limited	l Liability Li	imited Partnership			
partner	closed application, certificate of status ship to transact business in Florida. return all correspondence concerning			to register a	foreign limited partnersi	hip or lim	ited liabi	lity lin
Lori V	an Hoekelen							
	Contact Person					=1.0	20	
Van H	ockelen Associates, L.L.C.						19	
Firm/Company			<del></del>		22	007		
P.O. B	ox 88					SA	2019 OCT 18	-
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McAde	DO, PA 18237					Π,,,	PH 4: 45	, i ;
	City, State and Zip Co	de				10:	<del>-:</del> -	٠
loriv@	vhgreenhouses.com					음.	ᇿ	
E-ma	il address: (to be used for future annua	l report no	utication)	<u> </u>		>		
For fur	ther information concerning this matte	r, please ca	dt:					
	an Hoekelen	at	570	929-191	5			
	Name of Contact Person	aı	Area Code and Daytime Telephone Number					
Enclose	d is a check for the following amount	:						
(\$96	000.00 Filing Fees \$1,008.75 Filing Fee and and Certificate Registered Agent Status		\$1,052.50 F and Certifie		\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status			
Registra Division Clifton 2661 Ex	T ADDRESS: ation Section to of Corporations Building tecutive Center Circle tissee, FL 32301	Re Di P.	AlLING AD gistration Sec vision of Cor O. Box 6327 Ilahassee, FL	ction porations				

### APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

TO TRANSACT BUSINESS IN FLORIDA A & A Real Estate Associates, 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 trans business in Florida; must contain acceptable suffix. , Pennsylvania 3. October 2, 1997 State or Country of Formation Date of Formation 4. Federal Employer Identification Number 23-2927029 5. Name of Registered Agent for Service of Process and Florida Street Address: Alexzandriea R. Van Hoekelen 2580 Judge Fran Jamieson Way, Suite 3217 Melbourne, Florida 32940 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, ----A. can Mathe Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 220 S. Hancock St. P.O. Box 88 McAdoo, PA 18237 McAdoo, PA 18237 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 Pariner: \_\_\_\_\_ Van Hoekelen Associates, L.L.C. Name of General Partner: Route 309 Street Address: \_\_\_\_\_ Street Address: McAdoo, PA 18237 P.O. Box 88 Mailing Address: Mailing Address:\_\_\_\_\_ McAdoo, PA 18237 Name of General Partner: Name of General Partner: Street Address: Street Address:

\_\_\_\_\_ Mailing Address: \_\_\_\_\_

Mailing Address:\_\_\_

Name of General Partner:	Name of General Partner:	2019 TAIL
Street Address:	Street Address;	8 7
Mailing Address:		T IB PH 4
11. Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 Note: If the date inserted in this block does not mee document's effective date on the Department of State.  12. Attached is a certificate of existence duly authorities a certificate of existence duly authorities a certificate of existence duly authorities and department of State, by the Secretary of State law of which it is organized.	days after the date this document is filed by the act the applicable statutory filing requirements, thin ate's records.  Inticated, not more than 90 days prior to the deliver	s date will not be listed as the
Signed this 10TH day of OCTO	Hockelen Associates, L.L.C., a Pennsylva	nia limited liability company
Ву:	Signature of a general partner i Van Hoekelen, Member ne facts stated herein are true and the individual is	s aware that false information
Filing Fees: Certified Copy (optional):	\$1,000.00 (\$965 Filing Fee and \$35 F \$52.50	Registered Agent Fee)

Page 2 of 2

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

10/18/2019

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING.

2019 OCT 18 PM 4: 45 SEUN GALY OF STATE SEUN GREEFFLORID

I DO HEREBY CERTIFY THAT,

A & A REAL ESTATE ASSOCIATES, L.P.

is duly registered as a Pennsylvania Limited Partnership under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

THE COLUMN SALVANIA

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC191018121036-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify