ivision of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000031383 3)))



H200000313833ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number: 120160000017

Phone : (855) 498-5500

Fax Number

: (800)432-3622

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Pmail	Address:				

## FLORIDA/FOREIGN LP/LLLP REDWOOD INVESTMENT GROUP III LP

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$1,052.50

K. SALY JAN 2 1 ZULL

Taylor Seay 8004323622

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

	LIMITED LIABII	REIGN LIMITED PARTNERSHIP OR LITY LIMITED PARTNERSHIP CT BUSINESS IN FLORIDA
REDWOOD IN	VESTMENT GROUP III LP	
Acceptable Limited Pa Acceptable Limited Lia	rtnership suffixes: Limited Partners ability Limited Partnership suffixes:	Limited Liannity Limited Furthership, 22.5.5. St. Commission
If name unavailable, 1	name under which the limited partne business in Florid	rship or limited liability limited partnership proposes to register to transact la; must contain acceptable suffix.
California		3: 12/23/1981
Stat	e or Country of Formation	Date of Formation
4. Federal Employer	Identification Number 94-2799	919
5. Name of Registered	d Agent for Service of Process and	Florida Street Address:
Capitol Corporate Ser		
515 E. Park Ave., Flo	<del></del>	
<del> </del>	<u> </u>	
Tallahassee, FL 3236		A set of the section
<ol> <li>I hereby accept the of all statutes relat my position as regis</li> </ol>	ive to the proper and complete person stered agent. Your Sadleh Kitt	d agree to act in this capacity. I further agree to comply with the provisions rmance of my duties, and I am familiar with and accept the obligations of Tadlock, Asst Sec. on behalf of Capitol Corporate Services, Inc.
	Signat	
7, Principal Office:		8. Mailing Address: SAME
3121 Park Ave., Suite	; A	SAMO
Soquel, CA 95073		
9 If limited partner	ship is a limited liability limited pr	artnership, check box.
	office address, and mailing address	
10. Name, principal		Name of General Puriner:
	312! Park Ave., Suite A	Street Address:
Street Address;	Soquel, CA 95073	
	3121 Park Ave. Suite A	Mailing Address:
Mailing Address:	Soquel, CA 95073	
Name of General	Dardoer	Name of General Portner
		Street Address:
Street Address:		
Mailing Address		Mailing Address:
	·	Page 1 of 2

## Page 1 of 2

Name of Gene	ral Parmer:	_ Name of Genera	l Parmer;
Mailing Addro	252:	Mailing Address	5:
Note: If the date is document's effect 12. Attached is a Florida Departme	in other than the date of filing:  into the prior to nor more than 90 days after the inserted in this block does not meet the applicable ive date on the Department of State's records.  Sectificate of existence duly authenticated, not me int of State, by the Secretary of State or other off it is argunized.  And day of January	ore than 90 days proceed having custody	for to the delivery of this application to the
The individual signature of the submuted in a document of the subm	ning this document affirms that the facts stated cument to the Department of State constitutes a	mind degree tending	the individual is aware that false information as provided for in \$.817,155, F.S.
	Certified Capy (aptional): \$5	,00 <mark>0,00 (</mark> \$965 Filin, 2.50 .75	g Fee and \$35 Registered Agent Fee)

Page 2 of 2

## State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: REDWOOD INVESTMENT GROUP III L.P.

FILE NUMBER:
FORMATION DATE:

198517900038 06/27/1985

TYPE:

DOMESTIC LIMITED PARTNERSHIP

JURISDICTION: CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 24, 2020.

ALEX PADILLA Secretary of State

DLS