(Re	questor's Name)			
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(Cit	y/State/Zip/Phone	#)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer.				

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: 120000000088

Date: September 09, 2020				
Name: KEN HOWELL	_			
Reference #: 1262800				
Entity Name: SOZO IN	IVESTMENT PARTNERS LP			
✓ Articles of Incorporation/Author	rization to Transact Business			
Amendment				
Change of Agent	ISSUES? CALL			
Reinstatement	KEN:			
Conversion	518-213-0738			
Merger				
Dissolution/Withdrawal				
☐ Fictitious Name				
Other** CERTIFIED COPY AND GOOD STANDING UPON FILING **				
Authorized Amount: \$1,06	31.25			
Signature				

+44 (0)20.3786.1090

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sozo Investment Partners LP
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:
Michael Hanna
Contact Person
Sozo Investment Partners LP
Firm/Company
1465 Breakwater Terrace
Address
Hollywood, Florida 33019
City, State and Zip Code
info@sozoinvest.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Justin Kapahi 305 753-3684
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
□\$1,000.00 Filing Fee □\$1,008.75 Filing Fees □\$1,052.50 Filing Fees □\$1,061.25 Filing Fee, □\$1,06

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

Sozo Investment Partners LP (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. 3. 08/19/2020 State or Country of Formation Date of Formation 4. Federal Employer Identification Number: 85-2868760 5. Name of Registered Agent for Service of Process and Florida Street Address: Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 6. Thereby 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. Charlene Sati, Asst. VP. 09-08-20 Accompany Signature of Registered Agent 8. Mailing Address: 7. Principal Office: 1465 Breakwater Terrace 1465 Breakwater Terrace Hollywood, Florida 33019 Hollywood, Florida 33019 9. If limited partnership is a limited liability limited partnership, check box. \Box 10. Name, principal office address, and mailing address of each general partner: Name of General Partner: Sozo Investment Partners GP LLC Name of General Partner:_ 1465 Breakwater Terrace Street Address: Street Address: Hollywood, Florida 33019 Mailing Address: _____ ____ Mailing Address:__ Hollywood, Florida 33019 Name of General Partner:______ Name of General Partner:_____ Street Address: Mailing Address: _____ Mailing Address: _____

Page 1 of 2

Name of General Partner:		Name of General Partner:	
Street Address:		Street Address:	
Mailing Address:		Mailing Address:	
	ock does not meet the applicable	date this document is filed by the Florida Department of the statutory filing requirements, this date will not be listed	
12. Attached is a certificate of exist Florida Department of State, by the the law of which it is organized.	ence duly authenticated, not m Secretary of State or other off	ore than 90 days prior to the delivery of this application icial having custody of the entity's records in the jurisdi	to the letion under
Signed this 8th	_ day of	,20	
	Michael Ha	inna Michael Hanna, Managing Member of the	General Partner
	Signature o	of a general partner	
		herein are true and the individual is aware that false info third degree felony as provided for in s.817.155, F.S.	ormation
Filing Fees:	S1	,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Page 2 of 2

\$52.50 \$8.75

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

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SOZO INVESTMENT PARTNERS LP" 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 EIGHTH DAY OF SEPTEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOZO INVESTMENT PARTNERS LP" WAS FORMED ON THE NINETEENTH DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203615596

Date: 09-08-20

3484280 8300 SR# 20207163885