B20000000203

(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:				
W20-117684				

Office Use Only



300353236553

10/08/20--01018--017 **1000.00

2021 OCT 28 PH 3: 54

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: OZ MELBOURNE AIRPORT LP		
SUBJECT:	ership or Limit	ed Liability Limited Partnership
The enclosed application, certificate of status and fe partnership to transact business in Florida. Please return all correspondence concerning this ma		I to register a foreign limited partnership or limited liability limited
Nixaliz Martinez		
Contact Person		
OZ MELBOURNE AIRPORT LP		
Firm/Company		
1955 HARRISON STREET SUITE 200		
Address		
HOLLYWOOD, FL 33020		
City, State and Zip Code	<u>.</u>	
nixaliz.martinez@ad1global.com		
E-mail address: (to be used for future annual repor	t notification)	
For further information concerning this matter, pleas	se call:	
Nixaliz Martinez	954 at i	434-5001
Name of Contact Person		e and Daytime Telephone Number
Enclosed is a check for the following amount:		
■\$1,000,00 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee) □\$1,008.75 Filing Fees and Certificate of Status	□\$1,052.50 and Certi	
Mailing Address:		Street Address:
Registration Section		Registration Section

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

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

	TRANSACT BUSINESS IN FLORIDA			
OZ MELBOURNE AIRPORT 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.				
	ited partnership or limited liability limited partnership propss in Florida; must contain acceptable suffix.	poses to register to transact		
₂ Delaware	3 September 8, 2020			
State or Country of Formatic	on Date of Formation			
4. Federal Employer Identification Number: 82	5-3005726			
5. Name of Registered Agent for Service of Pro				
Steven Berkeley				
1955 Harrison Street Suite 200				
Hollywood, FL 33020				
7. Principal Office: 1955 Harrison Street Suite 200	Signature of Registered Agent 8. Mailing Address: 1955 Harrison Street Suite 200	2028 OCT		
Hollywood, FL 33020	Hollywood, F1, 33020	28		
9. If limited partnership is a limited liability li 10. Name, principal office address, and mailir	·	PA 3: 54		
Name of General Partner: OZ Melbourne Air	port GP, LLC Name of General Partner:			
Street Address: 1955 Harrison Street Suite				
Hollywood, FL 33020		·		
Mailing Address: 1955 Harrison Street Suite				
Hollywood, FL 33020				
Name of General Partner:	Name of General Partner:			
Street Address:	Street Address:			

Mailing Address: ______ Mailing Address: ______

Page 1 of 2

Name of General	Partner:	Name of General Partner:
Street Address:	1955 Harrison Street Suite 200	Street Address:
	Hollywood, FL 33020	
Mailing Address:		Mailing Address:
ll, Effective date, if	other than the date of filing: Septemb	er 08, 2020
<i>Tiffective date cannol</i> Note: If the date inse	t be prior to nor more than 90 days after	icable statutory filing requirements, this date will not be listed as the
	f State, by the Secretary of State or othe	ot more than 90 days prior to the delivery of this application to the rofficial having custody of the entity's records in the jurisdiction under
Signed this	n day of Octobe	.20 20
	Signati	are of a general partner
		ated herein are true and the individual is aware that false information es a third degree felony as provided for in s.817.155, F.S.
Cer	ng Fees: tified Copy (optional): tificate of Status (optional);	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

Page 2 of 2

Page 1



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

DELAWARE, DO HEREBY CERTIFY "OZ MELBOURNE AIRPORT 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 TWENTY-SECOND DAY OF SEPTEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OZ MELBOURNE AIRPORT LP" WAS FORMED ON THE EIGHTH DAY OF SEPTEMBER, A.D. 2020.

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

Authentication: 203708379

Date: 09-22-20