THE QUAL FOR THE GP OF THIS LP - Strul Associates LLC - IS BEING SUBMITTED FOR FILING JUST PRIOR TO THIS QUAL FOR THE LP. Thank you!

B21000098403

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : GUNSTER,YOAKLEY & STEWART,P.A.
Account Number : 076117000420
Phone : (561)650-0728
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: mstocks@gunster.com

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FLORIDA/FOREIGN LP/LLLP
STRUL ASSOCIATES LIMITED PARTNERSHIP

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	$1,008.75

Electronic Filing Menu Corporate Filing Menu Help

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

1. STRUL ASSOCIATES LIMITED PARTNERSHIP

(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.

2. NEVADA
State or Country of Formation

3. 10/5/1998
Date of Formation

4. **Federal Employer Identification Number:**

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

GY Corporate Services, Inc.

777 S Flagler Drive, Suite 500E

West Palm Beach, Florida 33401

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.*

GY CORPORATE SERVICES, INC.
By: /s/ Melanie B. Stocks
Signature of Registered Agent
Melanie B. Stocks, Asst. Secretary

2021 MAR 11 PM 12:23

7. **Principal Office:**

20320 Fairway Oaks Drive, #362

Boca Raton, Florida 33434

8. **Mailing Address:**

20320 Fairway Oaks Drive, #362

Boca Raton, Florida 33434

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: Strul Associates LLC
Street Address: 20320 Fairway Oaks Drive, #362
Boca Raton, Florida 33434
Mailing Address:

Name of General Partner:
Street Address:
Mailing Address:

Name of General Partner:
Street Address:
Mailing Address:

Name of General Partner:
Street Address:
Mailing Address:

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 9th day of March ,20 21

STRUL ASSOCIATES LLC
/s/ Aubrey M. Strul
By:_____
Signature of a general partner
Aubrey M. Strul, Manager

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
TALLAHASSEE, FLORIDA

SECRETARY OF STATE

STATE OF NEVADA

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **STRUL ASSOCIATES LIMITED PARTNERSHIP**, as a DOMESTIC LIMITED PARTNERSHIP (88) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 10/05/1998, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 03/09/2021.

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State

Certificate Number: B202103091493853
You may verify this certificate online at http://www.nvsos.gov