

B21000000166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

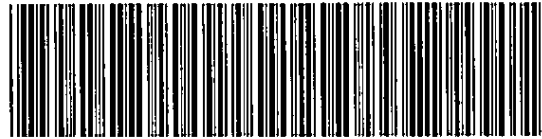
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W21000033998

Office Use Only



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02/22/21--01036--018 **1000.00

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2021 APR 22 PM 3:19
CLERK OF DISTRICT COURT
TALLAHASSEE, FL

45
4/22/21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 14, 2021

SUZANN CUNNINGHAM
2245 NORTH BANK DRIVE
SUITE 200
COLUMBUS, OH 43220

SUBJECT: SAHF AFFORDABLE HOUSING COMMUNITIES FUND 2019 (MS)
LP
Ref. Number: W21000033998

We have received your document for SAHF AFFORDABLE HOUSING COMMUNITIES FUND 2019 (MS) LP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name and business address of each general partner. (Note: All non-individual general partners must have an active registration with the Florida Dept. of State.)

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.

Yvette Scott
Document Specialist II

Letter Number: 821A00005356

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAHF Affordable Housing Communities Fund 2019 (MS) Limited Partnership
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:

Suzann Cunningham

Contact Person

National Affordable Housing Trust, Inc.

Firm/Company

2245 North Bank Drive, Suite 200

Address

Columbus, OH 43220

City, State and Zip Code

scunningham@naht.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzann Cunningham

Name of Contact Person

at (614)

226-2792

Area Code 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 Filing Fees and Certified Copy ☐ \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status

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

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TALLAHASSEE, FL
CLERK OF CIRCUIT COURT

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

1. SAHF Affordable Housing Communities Fund 2019 (MS) 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 LLP.

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. Ohio State or Country of Formation 3. 8/5/2019 Date of Formation

4. Federal Employer Identification Number 84-2638280

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

Cogency Global, Inc
115 North Calhoun Street, Suite 4
Tallahassee, FL 32301

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.

Jordan Guzman, Assistant Secretary
Signature of Registered Agent

7. Principal Office:

2245 North Bank Drive, Suite
Columbus, OH 43220

8. Mailing Address:

2245 North Bank Drive, Suite 200
Columbus, OH 43220

9. If limited partnership is a limited liability limited partnership, check box. ☐

10. Name, principal office address, and mailing address of each general partner:

NAHT/SAHF Affordable Housing

Name of General Partner: Communities 2019- 2, Inc. Name of General Partner: _____

Street Address: 2245 North Bank Dr., Ste 200 Street Address: _____
Columbus, OH 43220

Mailing Address: 2245 North Bank Dr., Ste. 200 Mailing Address: _____
Columbus, OH 43220

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

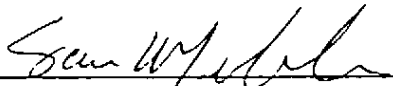
11. Effective date, if other than the date of filing: _____

(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 February 11th day of _____, 20 21



Signature of a general partner

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DEPT. OF STATE
TALLAHASSEE, FL

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

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SAHF AFFORDABLE HOUSING COMMUNITIES FUND 2019 (MS) LIMITED PARTNERSHIP, an Ohio Limited Partnership, Registration Number 4365237, filed on August 5, 2019, is currently in FULL FORCE AND EFFECT upon the records of this office.

FILED
2021 APR 22 PM 3:20
OFFICE OF THE SECRETARY OF STATE



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 14th day of April, A.D. 2021.

Frank LaRose

Ohio Secretary of State