

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.

(((H21000213259 3)))



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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.

mail Address:	

FLORIDA/FOREIGN LP/LLLP

EMERGING FLORIDA INCOME OPPORTUNITY FUND, LP FILE SECOND, AFTER H2100021236 3

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$1,052.50

**FILE SECOND, AFTER H2100021236 3

COVER LETTER

TO: Registration Section Division of Corpor	stions			
SUBJECT: Emerging Flori	da Income Opportunity F	und, LP		
Name o	of Foreign Limited Partne	rship or Limit	ed Liability Limited Partnership	
The enclosed application, or partnership to transact busin Please return all correspond	ess in Florida.		l to register a foreign limited partnership or limi	ted liability limited
Kate Agular				
	Contact Person			
White Sands Investment Par	ntners LLC			
	Firm/Company		·	
PO Box 399				
***************************************	Address			
Apalachicola, Florida 32325	•			
City,	State and Zip Code		- 	
kate@whitesandsinvestmen	rcom			
E-mail address: (to be use	d for future annual report	notification)		
For further information con-	cerming this matter, please	call:		
Kate Aguiar		at (<u>850</u>	312-8330	
Name of Contact P	erson	Area Cod	e and Daytime Telephone Number	
Enclosed is a check for the t	ollowing amount:			
(\$965 Filing Fee and \$35 Registered Agent Fee)	J\$1,008.75 Filing Fees and Certificate of Status	≣\$1,052.501 and Certif	- ·	
Mailing Address: Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	porations		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

Emerging Florida	Income Opportunity Fund, LP			
Acceptable Limited	Partnership suffixes: Limited Partn	ability Limited Partnership, which must include suffix) ership, Limited, L.P., LP, or Ltd. es: Limited Liability Limited Partnership, L.L.L.P. or LLLP.		
If name unavailabl		tnership or limited liability limited partnership proposes to re orida; must contain acceptable suffix.	gister to transact	
2. Delaware		3. May 24, 2021		
	tate or Country of Formation	Date of Formation		
4. Federal Employe	er Identification Number: 87-09007	747		
	red Agent for Service of Process at			
Steven Etchen				
433 Cape San Blas	Road			
Port St. Joe, Florida	32456			
6. I hereby accept to of all statutes rel my position as req	ative to the proper and complete per gistered agent.	and agree to act in this capacity. I further agree to comply we formance of my duties, and I am familiar with and accept the lature of Registered Agent	ith the provisions tobligations of	
7. Principal Office:	•	8. Mailing Address:		
433 Cape San Blas		PO Box 399		
Port St. Joe, Florida		Apalachicola, Florida 32329		
9. If limited partur	ership is a limited liability limited (partnership, check box.		
10. Name, principa	al office address; and mailing addr	ress of each general partner:	110	
Name of Genera	Portner Emerging Flor	ress of each general partner: I wome Opportunity Fund GP, Name of General Partner:	, LLC	
Street Address:	433 Cape San Blas Road	Street Address:		
Street Address.	Port St. Joe, Florida 32456			
Mailing Address		Mailing Address:		
Minning Penditon	J			
Name of Genera	d Partner:	Name of General Partner:		
		Street Address:		
Mailino Addresa		Mailing Address:		
,				

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Name of General Partner:	Name of General Parmer:
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 Note: If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records.	e date this document is filed by the Florida Department of State:) le statutory filing requirements, this date will not be listed as the
the love of indich it is parented	ficial having custody of the entity's records in the jurisdiction under
Signed this day of May	Flariba Income Opportunity Fund GP, LL
By: Signature	Flaniba Income Opportunity Fund GP, LLI Z Its: Authorized Person of a general partner

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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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "EMERGING FLORIDA INCOME OPPORTUNITY

FUND, 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-SEVENTH DAY OF MAY,

A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EMERGING FLORIDA INCOME OPPORTUNITY FUND, LP" WAS FORMED ON THE TWENTY-FOURTH DAY OF MAY, A.D. 2021.

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

5942034 8300 SR# 20212166559

You may verify this certificate online at corp.delaware.gov/authver.shtml

WSQC .

Authentication: 203310889

Date: 05-27-21