

BA1000000244

(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:

0508-12M

Office Use Only



100367721341

06/10/21--01007--027 \*\*1000.00

RECEIVED  
FILED  
2021 JUN 10 PM 2:32  
2021 JUN 14 AM 11:35  
ALLAHASSEE, FLORIDA  
SECRETARY OF STATE  
ALLAHASSEE, FL

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

GREEN OAKS DRIVE LP

Signature \_\_\_\_\_

Requested by: SETH

06/09/21

Name

Date

Time

Walk-In

Will Pick Up

172 Ponder's Printing • Tallahassee, FL 32301

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Green Oaks Drive 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:

Yakov Reznikov

\_\_\_\_\_  
Contact Person

Green Oaks Drive LP

\_\_\_\_\_  
Firm/Company

2417 Stroud Ave.

\_\_\_\_\_  
Address

Tampa FL 33629

\_\_\_\_\_  
City, State and Zip Code

yreznikov@gmail.com

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

For further information concerning this matter, please call:

Yakov Reznikov

at ( 415 ) 637-6408

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$1,000.00 Filing Fee<br>(\$965 Filing Fee and<br>\$35 Registered Agent<br>Fee) | <input type="checkbox"/> \$1,008.75 Filing Fees<br>and Certificate of<br>Status | <input type="checkbox"/> \$1,052.50 Filing Fees<br>and Certified Copy | <input type="checkbox"/> \$1,061.25 Filing Fee,<br>Certified Copy, and<br>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

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

1. Green Oaks Drive 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.

2. Pensilvannya, US

State or Country of Formation

3. 12/2006

Date of Formation

4. Federal Employer Identification Number 27-2807871

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

Yakov Reznikov

2417 W Stroud Ave., Tampa FL 33629

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.

[Signature]  
Signature of Registered Agent

7. Principal Office:

2417 W Stroud Ave., Tampa FL 33629

8. Mailing Address:

1101 Hedgeside Ave., Napa CA 94558

FILED  
2006 DEC 14 AM 11:35  
CLERK OF STATE  
TREASURY  
TAMPA, FL

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: Yakov Reznikov

Name of General Partner: \_\_\_\_\_

Street Address: 1101 Hedgeside Ave., Napa CA

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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: \_\_\_\_\_

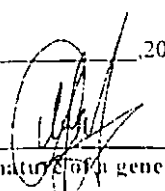
11. Effective date, if other than the date of filing: \_\_\_\_\_

*(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 8th day of June, 2021

  
\_\_\_\_\_  
Signature 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  |

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

03/12/2021

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Green Oaks Drive, LP

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set  
my hand and caused the Seal of the Secretary's  
Office to be affixed, the day and year above written

*William W. Desires*

Acting Secretary of the Commonwealth

Certification Number: TSC210312111014-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>