B2100000297

| (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: | | | | | |
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Office Use Only



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| CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 | | |
|--|---|--------|
| ACCOUNT NO. | : | 120000 |
| REFERENCE | : | 906851 |
| AUTHORIZATION | | Charle |

\$ 1000.00 COST LIMIT :

: I20000000195

7814304

ORDER DATE : July 15, 2021

ORDER TIME : 1:48 PM

ORDER NO. : 906851-010

CUSTOMER NO: 7814304

FOREIGN FILINGS

NAME: CH REALTY IX-LEGACY MHC

ORLANDO ENCHANTED LAKES,

L.P.

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER: _____

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|---|----------------------------------|---|
| CH Realty IX-Lenacy MHC Orlando | Enchanted Lak | es. L.P. |
| Name of Foreign Limited Partr | | |
| The enclosed application, certificate of status and fe partnership to transact business in Florida. Please return all correspondence concerning this ma | | o register a foreign limited partnership or limited liability limited |
| Denise Cottle | | |
| Contact Person | | _ |
| Crow Holdings Capital Partners, L.L.C. | | |
| Firm/Company | | _ |
| 3819 Maple Avenue | | |
| Address | | _ |
| Dallas, Texas 75219 | | |
| City, State and Zip Code | | _ |
| dcottle@crowholdings.com | | |
| E-mail address: (to be used for future annual report | t notification) | |
| For further information concerning this matter, please | se call: | |
| David Crites | 214 at (| 661-8228 |
| Name of Contact Person | — \ | 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 Fil and Certified | |
| Mailing Address: | | Street Address: |
| Registration Section | | Registration Section |
| | | |

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

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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

CH Realty IX-Legacy MHC Orlando Enchanted Lakes, L.P.

(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. , Delaware 3 06/29/2021 State or Country of Formation Date of Formation 4. Federal Employer Identification Number _ 5. Name of Registered Agent for Service of Process and Florida Street Address: Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 6. Thereby 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, and, assistant via president Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 10810 North Tatum Blvd., Ste. 102-301 10810 North Tatum Blvd., Ste. 102-301 Phoenix, AZ 85028 Phoenix, AZ 85028 9. If limited partnership is a limited liability limited partnership, check box. 10. Name, principal office address, and mailing address of each general partner: CH Realty IX-Legacy MHC Orlando Enchanted Lakes GP, L.L.C. Name of General Partner: Name of General Partner: 10810 North Tatum Blvd., Ste. 102-301 Street Address: Street Address: Phoenix, AZ 85028 10810 North Tatum Blvd., Ste. 102-301 Mailing Address: Mailing Address:____ Phoenix, AZ 85028 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 I | Partner: |
|-----------------------------------|---|---------------------------------|--|
| Street Address: | | Street Address: | |
| Mailing Address: | | Mailing Address:_ | |
| Note: If the date inserted in the | han the date of filing: or to nor more than 90 days aft his block does not meet the app the Department of State's reco | plicable statutory filing requi | tiled by the Florida Department of State.) rements, this date will not be listed as the |
| | by the Secretary of State or oth | | to the delivery of this application to the fthe entity's records in the jurisdiction under |
| Signed this 1st | day of | .20 2021 | _ |
| | (M). | | |
| | Signa | ture of a general partner | see name, title and capacity below |
| The individual signing this do | ocument affirms that the facts s | stated herein are true and the | individual is aware that false information |

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

Page 2 of 2

Patrick O'Malley, manager of Legacy Communities II, LLC, manager of LGC MHC II REIT, LLC, managing member of Legacy 5 Pack Portfolio GP, LLC, manager of CH Realty IX-Legacy MHC Orlando Enchanted Lakes GP, L.L.C., general partner of CH Realty IX-Legacy MHC Orlando Enchanted Lakes, L.P.



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

DELAWARE, DO HEREBY CERTIFY "CH REALTY IX-LEGACY MHC ORLANDO

ENCHANTED LAKES, L.P." 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 FIFTEENTH DAY OF

JULY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CH REALTY IX-LEGACY MHC ORLANDO ENCHANTED LAKES, L.P." WAS FORMED ON THE TWENTY-NINTH DAY OF JUNE, A.D. 2021.

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

Authentication: 203681557

Date: 07-15-21