# 13210000000401

(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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2021 SEP 15 AM 7: 52

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# CT CORP

## 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

09/15/2021

D	ate:	09/15/2021	wil SW
		Acc#I20160000072	4. ( ) - W
Name:	Star I 799	95 Owner, LP	
Document #:			
Order #:	13876424	1	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of		File GF	P First
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Apostille/Notarial Certification:		Country of Destination:  Number of Certs:	
Filing:	Certifie Plain: COGS:	ed: 🗸	
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amour	nt:\$ 1052.50	

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Star 1 7995 Owner, LP	
	tnership or Limited Liability Limited Partnership
The enclosed application, certificate of status and partnership to transact business in Florida. Please return all correspondence concerning this m	fees are submitted to register a foreign limited partnership or limited liability limited natter to:
Brooke Hudspeth	
Contact Person	
Invesco Real Estate	
Firm/Company	
2001 Ross Avenue, Suite 3400	
Address	<del></del>
Dallas, TX 75201	
City, State and Zip Code	·
brooke.hudspeth@invesco.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, plea	ase call:
Deburah Scherer	at (305 ) 579-7720
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
S1,000.00 Filing Fees S1,008.75 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee) \$1,008.75 Filing Fee and Certificate of Status	\$1,052.50 Filing Fees S1,061.25 Filing Fee, and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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

1. Star I 7995 Own	er, LP		
Acceptable Limited	l Partnership suffixes: Limited Partne	bility Limited Partnership, which must include so reship, Limited, L.P., LP, or Ltd. Limited Liability Limited Partnership, L.L.L.P. or	
If name unavailab	le, name under which the limited parts business in Flor	nership or limited liability limited partnership proporida; must contain acceptable suffix.	ses to register to transact
2. Delaware		3 9/7/2021	
S	State or Country of Formation	Date of Formation	
4. Federal Employ	er Identification Number		
5. Name of Registe	ered Agent for Service of Process an	d Florida Street Address:	
C T Corporation Sy	ystem		
1200 South Pine Is	land Road		
Plantation, Florida	33324		
6. I hereby accept to of all statutes reimy position as re	gistered agent.  By:  Ovi 110	nd agree to act in this capacity. I further agree to coormance of my duties, and I am familiar with and accomposition System  Sandra Zwijack, Assistant Sture of Registered Agent	onne elementitione i amandi.
7. Principal Office:		8. Mailing Address:	
2001 Ross Avenue,	Suite 3400	2001 Ross Avenue, Suite 3400	20
Dallas, TX 75201		Dałlas, TX 75201	21.527
9. If limited partne	ership is a limited liability limited pa	artnership, check box.	— 15 E
<ol><li>Name, principa</li></ol>	al office address, and mailing addres	s of each general partner:	7.7
Name of Genera	Partner: Tampa Industrial GP, LLC	Name of General Partner:	52
Street Address:	2001 Ross Avenue, Suite 3400	Street Address:	
	Dallas, TX 75201		
Mailing Addisses	2001 Ross Avenue, Suite 3400	Mailing Addays	
,g	Dallas, TX 75201	Mailing Address:	
Name of Genera	l Partner:	Name of General Partner:	
		Street Address:	
		<del></del> -	

Page 1 of 2

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 a Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.  12. Attached is a certificate of existence duly authenticated, not meet Florida Department of State, by the Secretary of State or other official work of which it is organized.	e statutory filing requirements, this date will not be listed as the ore than 90 days prior to the delivery of this application to the cial having custody of the entity's records in the jurisdiction under				
the law of which it is organized.  Signed this					
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: \$1,0 Certified Copy (optional): \$52 Certificate of Status (optional): \$8.7					

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Page 1



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

DELAWARE, DO HEREBY CERTIFY "STAR I 7995 OWNER, 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 FOURTEENTH DAY OF SEPTEMBER, A.D. 2021.

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

Authentication: 204152640

Date: 09-14-21

6219027 8300 SR# 20213239619