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.

Electronic Filing Cover Sheet

(((H21000432013 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023

Phone : (614)280-3338

Fax Number

: (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA/FOREIGN LP/LLLP

Flagler Property Owner, L.P.

Certificate of Status	U
Certified Copy	1
Page Count	0.4
Estimated Charge	\$1,052.50

FILE SECOND

Electronic Filing Menu Corporate Filing Menu

Help

S. HAWKES

NOV _ = 2021

Page, 3 of 5

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

Flagler Property Owner, L.P.	
Acceptable Limited Partnership suffixes: Limited	ited Liability Limited Partnership, which must include suffix) I Parmership, Limited, L.P., LP, or Ltd. suffixes: I imited Liability Limited Partnership, L.L.L.P. or LLLP.
	ted partnership or limited liability limited partnership proposes to register to transact is in Florida; must contain acceptable suffix.
2 Delaware	3.09/21/2021
State or Country of Formatic	
4. Federal Employer Identification Number _	
5. Name of Registered Agent for Service of Pro-	ocess and Florida Street Address:
C T Corporation System	and a specific part of
1200 South Pine Island Road	
Plantation, Florida 33324	
of all statutes relative to the proper and comp my position as registered agent. By:	Lese performance of my duties, and I am familiar with and accept the obligations of C.T. Corporation System Meredith Hellwig, Assistant Secretary Signature of Registered Agent
7. Principal Office:	8 Mailing Address:
591 West Putnam Avenue	591 West Putnam Avenue
Greenwich, CT 06830	Greenwich, CT 06830
9. If limited partnership is a limited liability I 10. Name, principal office address, and maili	
	wner GP, L.L.C. Name of General Partner.
	Name of General Partner.
Street Address: 591 West Putnam Avenue	Street Address:
Greenwich, CT 06830	
Mailing Address:	Mailing Address:
Name of General Partner	Name of General Pattner
Street Address:	Street Address:
Mailing Address:	Mailing Address:
	Page 1 of 2

H 947 - 6 25/2019 Wolfers Klunde Online

19542080845

Filing Fees:

Certified Copy (optional): Certificate of Status (optional):

Name of General Part	Name of General Partner;	Name of General Partner;				
Street Address.	Street Address.					
Mailing Address:	Mailing Address:					
Note: If the date inserted	than the date of filing					
12 Attached is a certificat Florida Department of Sta the law of which it is orga	of existence duly authenticated, not more than 90 days prior to the delivery of this application to the , by the Secretary of State or other official having custody of the entity's records in the jurisdiction undized	er				
Signed this 23rd	day of November, 20 21					
	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					

Page 2 of 2

\$52,50

\$8,75

\$1,000,00 (\$965 Filing Fee and \$35 Registered Agent Fee)

submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "FLAGLER PROPERTY OWNER, 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 TWENTY-THIRD DAY OF NOVEMBER, A.D. 2021.

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

Authentication: 204774966

Date: 11-23-21

6249960 8300 SR# 20213881535