B220000000022

	(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	o Filing Officer:

Office Use Only



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2022 JAN 12 PM 3: 28

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S. ROBERTS

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Tallhassee, FL 32301 Phone: 850-558-1500							
ACCOUNT NO. : 12000000195							
REFERENCE : 373863 7814304							
AUTHORIZATION :							
COST LIMIT : \$ 1000.00							
ORDER DATE : January 12, 2022							
ORDER TIME : 2:10 PM							
ORDER NO. : 373863-010							
CUSTOMER NO: 7814304							
FOREIGN FILINGS							
NAME: CH REALTY IX/MF FORT MYERS RETREAT OWNER, L.P.							
XXXX QUALIFICATION (TYPE: LP)							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING							

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

CORPORATION SERVICE COMPANY

COVER LETTER

то:	Registration Section Division of Corporations
SUBJ	ECT: CH Realty IX/MF Fort Myers Retreat Owner, L.P.
0000	Name of Foreign Limited Partnership or Limited Liability Limited Partnership
partne	nclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited eachip to transact business in Florida. Exercise return all correspondence concerning this matter to:
Deni	ise Cottle
	Contact Person
Crow	Holdings Capital Partners, L.L.C.
	Firm/Company
3819	Maple Avenue
	Address
Dalla	s. Texas 75219
	City, State and Zip Code
	e@crowholdings.com
E-m	ail address: (to be used for future annual report notification)
For fur	rther information concerning this matter, please call:
Davi	d Crites 214 661-8228
	Name of Contact Person Area Code and Daytime Telephone Number
Enclos	sed is a check for the following amount:
(\$9	100.00 Filing Fee

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

CH Realty IX/MF Fort Myers Retreat Owner, 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. 3. 01/10/2022 2. Delaware 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 stantes 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 of Registered Agent 7. Principal Office: 8. Mailing Address: 3819 Maple Avenue 3819 Maple Avenue Dallas, Texas 75219 Dallas, Texas 75219 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/MF Fort Myers Retreat Name of General Partner; Owner GP, L.L.C. Name of General Partner: 3819 Maple Avenue Street Address: Dallas, Texas 75219 Street Address: _____ Mailing Address:_____ Name of General Partner:_______Name of General Partner:______ Street Address: _____ Street Address: _____ Mailing Address: ______ Mailing Address: ______

Page 1 of 2

Name of General Part	ner:		Name of General Partner:	
Street Address:			Street Address:	
			Mailing Address:	
(Effective date cannot be p	<i>rior to nor more</i> in this block doe:	e than 90 days after the a s not meet the applicable	date this document is filed by the Florida Department of State.) e statutory filing requirements, this date will not be listed as the	
12. Attached is a certificat Florida Department of Sta the law of which it is orga	te, by the Secreta	lly authenticated, not mo ary of State or other offic	ore than 90 days prior to the delivery of this application to the cial having custody of the entity's records in the jurisdiction und	ler
Signed this	day o	f	2022	
	RAN	NASA		
		Signature of	f a general partner see signature block below for capacity	
The individual signing this	document affiri	ms that the facts stated he	nerein 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): Certificate of Status (optional): \$52.50

\$8.75

Page 2 of 2

Nathan B. Schubert, Vice President of Fund IX Managers, L.L.C., manager of CH Realty IX/MF Fort Myers Retreat Owner GP, L.L.C., general parter of CH Realty IX/MF Fort Myers Retreat Owner, L.P.

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CH REALTY IX/MF FORT MYERS RETREAT

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 TWELFTH DAY OF JANUARY, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CH REALTY IX/MF FORT MYERS RETREAT OWNER, L.P." WAS FORMED ON THE TENTH DAY OF JANUARY, A.D. 2022.

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

Authentication: 202380954

Date: 01-12-22

6532204 8300 SR# 20220104913