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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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

Email Address:	
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FLORIDA/FOREIGN LP/LLLP SSFR FLORIDA ACQUISITION (NO. 1) LP

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Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

S. ROBERTS

JAN 1 9 2022

Tallahassee, FL 32314

H22000025159

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: SSFR Florida Acquisition Name of Foreign Limited Partn		ability Limited Partnership	
The enclosed application, certificate of status and fee partnership to transact business in Florida. Please return all correspondence concerning this mat		egister a foreign limited partnership or limited liability limited	
Contact Person			
Capitol Services - Corporate Filings	Team		
Firm/Company			
515 East Park Avenue 2nd Fl			
Address			
Tallahassee, FL 32301			
City, State and Zip Code			
astorozuk@starlightinvest.com			
E-mail address: (to be used for future annual repor	t notification)		
For further information concerning this matter, pleas	se call:		
To farmer information concerning and matter, pre-		498 - 5500	
Name of Contact Person	at (855 Area Code an	d 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 Filin and Certified		
Mailing Address:		Street Address:	
Registration Section		Registration Section	
— -		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

H22000025159

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

Acceptable Limited Partnership suffixes: 1	o. 1) LP r Limited Liability Limited Partnership, which must include suffix) Limited Partnership, Limited, L.P., LP, or Ltd. ership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
If name unavailable, name under which the	be limited partnership or limited liability limited partnership proposes to register to transact susiness in Florida; must contain acceptable suffix.
2. Delaware	3. January 12, 2022
State or Country of Fo	
4. Federal Employer Identification Num	_{ber:} 87-4438002
5. Name of Registered Agent for Service	
Corporation Service Company	
1201 Hays Street	
Tallahassee, FL 32301	
of all statutes relative to the proper and my position as registered agent.	stered agent and agree to act in this capacity. I further agree to comply with the provisions complete performance of my duties, and I am familiar with and accept the obligations of Maliana Dakovan Assistant Secretary Signature of Registered Agent 8. Mailing Address: 420 Sun Lake Circle
7. Principal Office:	8. Mailing Address:
420 Sun Lake Circle	8. Mailing Address: 420 Sun Lake Circle
Lake Mary, Florida 32746	Lake Mary, Florida 32746
9. If limited partnership is a limited lial	oility limited partnership, check box.
10. Name, principal office address, and	mailing address of each general partner:
Name of General Partner: SSFR Florida	Acquisition (No. 1) (GP) LLC Name of General Partner:
Street Address: 3280 Bloor Street	et West, Suite 1400 Street Address:
Toronto, Cana	da M8X 2X3
Mailing Address:	Mailing Address:
Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:

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Name of General Partner:		_ Name of General Pa	artner:	
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 recorded.				
the law of which it is organized	1.			
Signed this 19th day of January				
The individual signing this document to the	ument affirms that the facts stated he Department of State constitutes a thir	rein are true and the inc rd degree felony as pro	dividual is aware that false information wided for in s.817.155, F.S.	

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\$52.50

\$8.75

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SSFR FLORIDA ACQUISITION (NO. 1) 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 NINETEENTH DAY OF JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SSFR FLORIDA ACQUISITION (NO. 1) LP" WAS FORMED ON THE TWELFTH DAY OF JANUARY, A.D. 2022.

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

6538433 8300

SR# 20220176267

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202432795

Date: 01-19-22