b 22000000238

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Considerations to Siling Officer
Special Instructions to Filing Officer:
(<i>'')</i>
1.4.61
11270018511820
W22000351162000

Office Use Only



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2022114Y-9 PH 7: 24

S. FRANKLIN MAY 1 0 2022

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Sunset Ridge Associates Limited Par	ternship				
Name of Foreign Limited Pa	rtnership or Limited	Liability Limited Partnership			
The enclosed application, certificate of status and partnership to transact business in Florida. Please return all correspondence concerning this r		to register a foreign limited partnership	or limite	ed liabilit	y limited
Sheri Burke					
Contact Person					
T&R Properties, Inc					
Firm/Company		_			
3895 Stoneridge Lane					
Address		_			
Dublin, OH 43017					
City, State and Zip Code		_			
accounting@trprop.com					
E-mail address: (to be used for future annual rep	ort notification)				
For further information concerning this matter, pl	ease call:				
Sheri Burke	614 at (923-4065			
Name of Contact Person		and Daytime Telephone Number		207	
Enclosed is a check for the following amount:				2022 HAY -9	- eum - 1
■\$1,000.00 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee) □\$1,008.75 Filing Fee and Certificate of Status	es □\$1.052.50 Fi and Certifie			7	14 <u>22</u> 143 1
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 8 Tallahassee, FL 32303	810	7: 24	

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

Acceptable Limited Partnership suffixes: Limited F	d Liability Limited Partnership, which must include suffix) Partnership, Limited, L.P., LP, or Ltd. uffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
	I partnership or limited liability limited partnership proposes to register to transact n Florida; must contain acceptable suffix.
2 Ohio	3.7/05/1995
State or Country of Formation	
4. Federal Employer Identification Number $\frac{31-1}{2}$	373406
5. Name of Registered Agent for Service of Proce	
CT Corporation System	
1200 South Pine Island Road	_ .
Plantation, FL 33324	_
of all statutes relative to the proper and complet my position as registered agent.	gent and agree to act in this capacity. I further agree to comply with the provisions e performance of my duties, and I am familiar with and accept the obligations of Christine Kelm Assistant Secretary Signature of Registered Agent
7. Principal Office:	Signature of Registered Agent 8. Mailing Address:
3895 Stoneridge Lane	3905 Stongridge Lane
Dublin, OH 43017	Dublin, OH 43017
9. If limited partnership is a limited liability lim	ited partnership, check box. □
10. Name, principal office address, and mailing	address of each general partner:
Name of General Partner: P. Ronald Sabatino	Name of General Partner:
Street Address: 3895 Stoneridge Lane	Street Address:
Dublin, OH 43017	
Mailing Address: 3895 Stoneridge Lane	Mailing Address:
Dublin, OH 43017	
	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:

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 fili (Effective date cannot be prior to nor more than Note: If the date inserted in this block does not a document's effective date on the Department of	to days after the date this document is filed by the Florida Department of State.) Let the applicable statutory filing requirements, this date will not be listed as the
12. Attached is a certificate of existence duly au Florida Department of State, by the Secretary of the law of which it is organized.	enticated, not more than 90 days prior to the delivery of this application to the tate or other official having custody of the entity's records in the jurisdiction under
Signed this 24 day of Man	Signature of a general partner
The individual signing this document affirms the submitted in a document to the Department of S	the facts stated herein are true and the individual is aware that false information the constitutes a third degree felony as provided for in s.817.155, F.S.
Filing Fees: Certified Copy (optional): Certificate of Status (options	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fco) \$52.50 : \$8.75

Page 2 of 2

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SUNSET RIDGE ASSOCIATES LIMITED PARTNERSHIP, an Ohio Limited Partnership, Registration Number 909693, filed on July 5, 1995, is currently in FULL FORCE AND EFFECT upon the records of this office.

2022 HAY -9 PH 7: 24

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 26th day of August, A.D. 2014.



Ohio Secretary of State

an Huster

Validation Number: 201423800359



April 16, 2022

SHERI BURKE 3895 STONERIDE LANE DUBLIN, OH 43017 US

SUBJECT: SUNSET RIDGE ASSOCIATES LP

Ref. Number: W22000051162

We have received your document for SUNSET RIDGE ASSOCIATES LP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

The word LP must be spelled out as it appears on the certificate.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 622A00008942