

B220000000302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

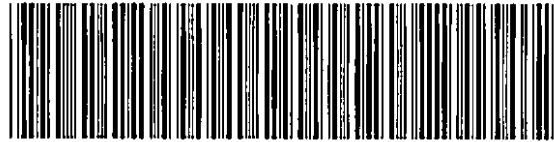
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. ROBERTS

JUN 16 2022

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 747961 5051651

AUTHORIZATION :

COST LIMIT : \$1,000.00

ORDER DATE : June 16, 2022

ORDER TIME : 2:27 PM

ORDER NO. : 747961-005

CUSTOMER NO: 5051651

FOREIGN FILINGS

NAME: GRAND NATIONAL APARTMENTS
OWNER, LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

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

1. Grand National Apartments Owner, LP

(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.

2. Delaware

State or Country of Formation

3. June 14, 2022

Date of Formation

4. Federal Employer Identification Number 88-2835456

5. Name of Registered Agent for Service of Process and Florida Street Address:

BCRA, LLC

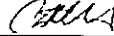
1905 N.W. Corporate Blvd., Suite 310

Boca Raton, FL 33431

6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes 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.

BCRA, LLC

By: Christopher Staller, a Manager



Signature of Registered Agent

7. Principal Office:

12765 W. Forest Hill Blvd.

Suite 1307

Wellington, FL 33414

8. Mailing Address:

SAME

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TALLAHASSEE, FL

9. If limited partnership is a limited liability limited partnership, check box. ☐

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: Grand National Apartments JV Partner, LLC

Street Address: 12765 W. Forest Hill Blvd., Ste. 1307

Wellington, FL 33414

Mailing Address: SAME

see FL Doc L2200026621

Name of General Partner: _____

Street Address: _____

Mailing Address: _____

Name of General Partner: _____

Street Address: _____

Mailing Address: _____

Name of General Partner: _____

Street Address: _____

Mailing Address: _____

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 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 organized.

Signed this 15th day of June, 2022

SEE ATTACHED SIGNATURE PAGE

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

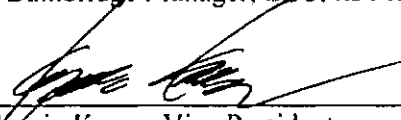
Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

**SIGNATURE PAGE TO PARTNERSHIP REGISTRATION FOR
GRAND NATIONAL APARTMENTS OWNER, LP**

GENERAL PARTNER

**GRAND NATIONAL APARTMENTS JV PARTNER,
LLC, a Florida limited liability company**

By: Bainbridge Manager, LLC, its Manager

By: 
Kevin Keane, Vice President

Address: 12765 W. Forest Hill Blvd., Suite 1307

Wellington, FL 33414

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GRAND NATIONAL APARTMENTS 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 FIFTEENTH DAY OF JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GRAND NATIONAL APARTMENTS OWNER, LP" WAS FORMED ON THE FOURTEENTH DAY OF JUNE, A.D. 2022.

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



A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

6856765 8300

SR# 20222737712

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

Authentication: 203690119

Date: 06-15-22