

B22000000560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

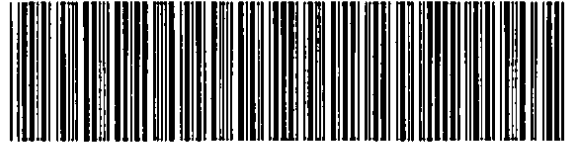
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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T. LEMIEUX  
DEC - 7 2022

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CLH Fund I, L.P.  
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.  
Please return all correspondence concerning this matter to:

Whitney Loftus

Contact Person

Capital Fund Law Group, LLP

Firm/Company

214 N Whispering Meadow Lane, #216

Address

Plain City, Utah 84404

City, State and Zip Code

info@capitalfundlaw.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Marinna Rosas

Name of Contact Person at ( 212 ) 203-4300  
Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

\$1,000.00 Filing Fee    ☐ \$1,008.75 Filing Fees    ☐ \$1,052.50 Filing Fees    ☐ \$1,061.25 Filing Fee,  
( \$965 Filing Fee and    and Certificate of    and Certified Copy    Certified Copy, and  
\$35 Registered Agent    Status          Certificate of Status  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 20, 2022

WHITNEY LOFTUS  
3214 N WHISPERING MEADOW LN #216  
PLAIN CITY, UT 84404

SUBJECT: CLH FUND I, LP  
Ref. Number: W22000132949

We have received your document for CLH FUND I, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 522A00023575

RECEIVED  
NOV 29 2022

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

1. CLH Fund I, 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 L.L.P.

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. 09/02/2022  
Date of Formation

4. Federal Employer Identification Number 92-0298358

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

National Registered Agents, Inc.

120 South Pine Islands Road

Plantation, Florida 33324

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.

DocuSigned by:

Randy Kricke

DE1570593

Signature of Registered Agent

7. Principal Office:

200 South Pine Islands Road

Plantation, Florida 33324

8. Mailing Address:

100 California Avenue, STE #204

Reno, Nevada 89509

If limited partnership is a limited liability limited partnership, check box. ☒

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

Name of General Partner: Affordable Housing Capital, LLC

Name of General Partner: \_\_\_\_\_

Street Address: 1200 South Pine Islands Road

Street Address: \_\_\_\_\_

Plantation, Florida 33324

Mailing Address: 100 California Avenue, STE #204

Mailing Address: \_\_\_\_\_

Reno, Nevada 89509

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

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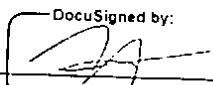
Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_  
\_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

1. 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.

2. 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 23rd day of September, 2022

DocuSigned by:

  
\_\_\_\_\_  
**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.

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

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CLH FUND I, 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 EIGHTEENTH DAY OF NOVEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLH FUND I, LP" WAS FORMED ON THE SECOND DAY OF SEPTEMBER, 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 "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

7012750 8300

SR# 20224058080

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 204898368

Date: 11-18-22