B2300000290

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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CT CORP

(850) 656- 4724 3558 lakesore Drive Tallahassee, FL 32312

09/19/2023

ate:	09/19/2023	- w: 1 > W
	Acc#I20160000072	4: () = W
MACP FL	JND 31, LP	
15130026	3 - 13	
	Country of Destination: Number of Certs:	
Certifi	ed: 🗸	Email Address for Annual Repo
Plain:		vcook@maynardnexsen
COGS:		
	MACP FU	Acc#I20160000072 MACP FUND 31, LP 15130026 - 13 Country of Destination: Number of Certs: Certified: Plain: COGS:

Thank you!

COVER LETTER

TO: Registration Section

Division of Corporations

Tallahassee, FL 32314

SUBJECT: MACP Fund 31, LP		
Name of Foreign Limited Partners	hip or Limited L	Liability Limited Partnership
The enclosed application, certificate of status and fees a partnership to transact business in Florida. Please return all correspondence concerning this matter		o register a foreign limited partnership or limited liability limiter
Valerie Cook		
Contact Person		-
Maynard Nexsen PC		
Firm/Company		_
1901 Sixth Avenue North, Suite 1700		
Address		_
Birmingham, AL 35203		
City, State and Zip Code		_
vcook@maynardnexsen.com		
E-mail address: (to be used for future annual report no	otification)	_
For further information concerning this matter, please c	all:	
Valerie Cook	205	488-3502
Name of Contact Person		and Daytime Telephone Number
Enclosed is a check for the following amount:		
\$1,000.00 Filing Fee S1,008.75 Filing Fees (\$965 Filing Fee and S35 Registered Agent Fee)	\$1,052.50 Filir and Certified	ing Fees S1,061.25 Filing Fee. d Copy Certified Copy, and Certificate of Status
Mailing Address: Registration Section		Street Address: Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		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

MACP Fond 31 LP

(Name of Limited Partnership or Limited Liab Acceptable Limited Partnership suffixes: Limited Partner. Acceptable Limited Liability Limited Partnership suffixes:	pility Limited Partnership, which must include suffi- ship, Limited, L.P., LP, or Ltd. Limited Liability Limited Partnership, L.L.L.P. or LI	
If name unavailable, name under which the limited partne business in Flori	ership or limited liability limited partnership proposes ida; must contain acceptable suffix.	to register to transact
, Delaware	3 9/15/2023	
State or Country of Formation	Date of Formation	
4. Federal Employer Identification Number: 93-3468	3174	
5. Name of Registered Agent for Service of Process and	f Florida Street Address:	
Charles J. Baier		
12015 Mountbatten Drive		
Tampa, FL 33626		
6. I hereby accept the appointment as registered agent an of all statutes relative to the proper and complete perfit my position as registered agent.	rmance of my duties, and I am familiar with and accepute	
ν.	ure of Registered Agent	
7. Principal Office:	·	
935 Main Street	1703 McMullen Booth Rd	_ _
Suite C1	#1037	023 \$
Safety Harbor, FL 34695	Safety Harbor, FL 34695	# T = 1
9. If limited partnership is a limited liability limited partnership. Name, principal office address, and mailing address. Name of General Partner: MACP Fund 31 GP, LLC	ss of each general partner:	HO LED 9 AM 8: 42
1703 McMullen Booth Rd #1037		·
Street Address: Safety Harbor, FL 34695	Street Address:	
Mailing Address:		
Name of General Partner:	 	
Street Address:	Street Address:	<u> </u>
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 filing: (Effective date cannot be prior to nor more than 90 o Note: If the date inserted in this block does not meet document's effective date on the Department of Stat	days after the date this document is filed by the Florida Department of State.) the applicable statutory filing requirements, this date will not be listed as the se's records.
	nticated, not more than 90 days prior to the delivery of this application to the te or other official having custody of the entity's records in the jurisdiction unde
Signed this day of	ber ,20 <u>2023</u>
	Signature of a general partner
The individual alumina this downward officers that the	a factor stated barrie are true and the individual is aware that falce information

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

Page 2 of 2



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

DELAWARE, DO HEREBY CERTIFY "MACP FUND 31, 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 SEPTEMBER, A.D. 2023.

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

A STATE OF THE STA

Authentication: 204187954

Date: 09-18-23

September 20, 2023

CT

,

The Application by Foreign Limited Partnership or Limited Liability Limited Partnership for MACP FUND 31, LP, a Delaware limited partnership or limited liability limited partnership, was filed on September 19, 2023 and assigned document number B23000000290. Please refer to this number whenever corresponding with this office.

The certification you requested is enclosed.

To maintain "active" status with the Division of Corporations, an annual report must be filed yearly between January 1st and May 1st beginning in the year following the file date or effective date indicated above. If the annual report is not filed by May 1st, a \$400 late fee will be added. It is your responsibility to remember to file your annual report in a timely manner.

A Federal Employer Identification Number (FEI/EIN) will be required when this report is filed. Apply today with the IRS online at https://sa.www4.irs.gov/modiein/individual/index.jsp.

Please be aware if the limited partnership address changes, it is the responsibility of the limited partnership to notify this office.

Should you have any questions concerning this matter, please contact this office at the address given below.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor
Registration Section
Division of Corporations

Letter Number: 223A00021704

Account number: I20160000072 Amount charged: 1052.50



Bepartment of State

Lordify the attached is a true and correct copy of the Application of Limited Partnership of MACP FUND 31, LP a Delaware limited partnership, authorized to transact business within the state of Elorida on September 19, 2023, as shown by the records of this office.

The document number of this limited partnership is B23000000290

Given under my hand and the Great Seal of the State of Florida at Tallahassee; the Capital, this the Twentieth day of September, 2023



CR2E022 (01-11)

Cord Byrd
Secretary of State



Bepartment of State

I certify from the records of this office that MACP FUND 31, LP is a Delaware limited partnership registered to transact business in the state of Florida on September 19, 2023.

The document number of this limited partnership is B23000000290

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twentieth day of September, 2023



CR2E022 (01-11)

Cord Byrd
Secretary of State

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

Acceptable Limited P	er mited Partnership or Limited Liabili Partnership suffixes: Limited Partnershi iability Limited Partnership suffixes: L	p, Limited, 1	P., LP, or Ltd.	••	
If name unavailable	, name under which the limited partners business in Florida:		d liability limited partnershi in acceptable suffix.	p proposes to regis	er to transac
2. Delaware		3.	9/15/2023		
Sta	nte or Country of Formation		Date of Forma	ntion	
4. Federal Employer	Identification Number: 93-346817	4			
5. Name of Register Charles J. Baier	ed Agent for Service of Process and F	lorida Stree	t Address:		
12015 Mountbatten l	Drive				
Tampa, FL 33626					
	(W Date	lance of my	luties, and I am familiar wit		
7 Dringing Office.	c.g	•	•		
7. Principal Office:935 Main Street		8. Mailing Address: 1703 McMullen Booth Rd		~>	
	.		water booti ka		
		#1037		SE SE	<u> </u>
		Safety Ha	rbor, FL 34695		FILE ARC
•	rship is a limited liability limited part	-		A A A A A A A A A A A A A A A A A A A	(C)
	office address, and mailing address of	of each gene	ral partner:	3: 4: 2	
Name of General	Partner: MACP Fund 31 GP, LLC	Na	me of General Partner:	. 2	
1703 McMullen Rooth Rd. #1037		Street Address:			
Safety Harbor, FL 34695	Safety Harbor, FL 34695				
Mailing Address:		Ma			
Name of General	Partner:		-		_
Street Address:					
Mailing Address:					

Page 1 of 2

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
	lays after the date this document is filed by the Florida Department of State.) the applicable statutory filing requirements, this date will not be listed as the e's records.
	ticated, not more than 90 days prior to the delivery of this application to the en other official having custody of the entity's records in the jurisdiction under
Signed this day ofSeptemb	per20 <u>2023</u>
	Obecusioned by: (1) Bailt 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)

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