pg 1 of 4 Division of Corporations https://efile.sunbiz.org/scripts/efileovr.exc

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

**Enter the email address for this business entity to be used for £uture அத்த annual report mailings. Enter only one email address please. 👬 🔾 Email Address:_

FLORIDA/FOREIGN LP/LLLP BD RC Jacksonville Wilson, LP

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$1,008.75

Electronic Filing Menu

Corporate Filing Menu

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

L BD RC Jacksonville Wilson, LP		
Acceptable Limited Partnership su	Hives: Limited Partne	bility Limited Partnership, which must include suffix) vship, Limited, L.P., LP, or Ltd. :: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
If name unavailable, name under		nership or limited liability limited partnership proposes to register to transact rida; must contain acceptable suffix.
2. Delaware		3. 9/19/2023
State or Countr	y of Formation	Date of Formation
4. Federal Employer Identification	on Number	
5. Name of Registered Agent for Corporate Creations Network, Inc.		d Florida Street Address:
801 US Hwy I		
North Palm Beach, Ft. 33408		
 I hereby accept the appointment of all statutes relative to the pro my position as registered agent. 	per and complete perf /s/ Caitlin Lazar	
7. Principal Office:		8. Mailing Address:
-		330 E. Crown Point Road
Winter Garden, FL 34787		8. Mailing Address: 330 E. Crown Point Road Winter Garden, FL 34787
Name of General Partner;	Capital Partners GP, 1	ess of each general partner:
		
Name of General Partner:		Mailing Address: Name of General Partner: Street Address:
Mailing Address:		Mailing Address:

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Name of General Partner		Name of General Partne	r:	
Street Address:		Street Address:		
		Mailing Address:		
Note: If the date inserted in the			by the Florida Department of State.) ints, this date will not be listed as the	
	-		e delivery of this application to the entity's records in the jurisdiction under	
Signed this 19th	day of September	,20 23		
	Chester.			
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.817.355, 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

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "BD RC JACKSONVILLE WILSON, 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 SEPTEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BD RC

JACKSONVILLE WILSON, LP" WAS FORMED ON THE NINETEENTH DAY OF

SEPTEMBER, A.D. 2023.

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



Authentication: 204195277

Date: 09-19-23