B2400000124

1			
(R	equestor's Name)		
(A	ddress)		
(Ad	ddress)	· · · ·	
(Ci	ty/State/Zip/Phone #)		
PICK-UP	WAIT	MAiL	
(Bı	isiness Entity Name)	 	
(Document Number)			
Certified Copies	Certificates of	of Status	
Special Instructions to Filing Officer:			
·	•		
<u> </u>			
i i	Office Use Only		



200422521532

2021 JEH 25 PH W: 03

2021 JEH 25 PH W: 03

- JALLAMASSEE FLORIDA

JAN 25 2024

K. Brumbley

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE : 281770 AUTHORIZATION : COST LIMIT : \$ 1000.00 ORDER DATE: January 23, 2024 ORDER TIME : 1:40 PM ORDER NO. : 281770-035 CUSTOMER NO: 4719887 FOREIGN FILINGS NAME: 26NORTH HOLDINGS LP XXXX QUALIFICATION (TYPE: LP) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING

EXAMINER: ___

CONTACT PERSON: Eyliena Baker -- EXT#

COVER LETTER

Tallahassee, FL 32314

TO:	Registration Section Division of Corporations	
	26North Holdings & D	
SUBJ	JECT:	p or Limited Liability Limited Partnership
partne		e submitted to register a foreign limited partnership or limited liability limited
	Contact Person	
	Firm/Company	
	Address	
	City. State and Zip Code	
E-ma	nail address: (to be used for future annual report no	fication)
For fur	urther information concerning this matter, please ca	l:
	Name of Contact Person	Area Code and Daytime Telephone Number
Enclos	sed is a check for the following amount:	
(S 9	965 Filing Fee and and Certificate of Status	1,052.50 Filing Fees
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations 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

26North Holdings 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. 3. August 29, 2022 State or Country of Formation Date of Formation 4. Federal Employer Identification Number:___ 5. Name of Registered Agent for Service of Process and Florida Street Address: Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 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. Enluna Oaker Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 26North Holdings LP 26North Holdings LP 600 Madison Avenue, 26th Floor 600 Madison Avenue, 26th Floor New York, NY 10022 New York, NY 10022 9. If limited partnership is a limited liability limited partnership, check box. \Box 10. Name, principal office address, and mailing address of each general partner: Name of General Partner: 26North Partners GP LLC Name of General Partner: 600 Madison Avenue, 26th Floor Street Address: Street Address: New York, NY 10022 600 Madison Avenue, 26th Floor Mailing Address: ___ Mailing Address: New York, NY 10022 Name of General Partner:_______ 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 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 23rd day of January	.20 <u>24</u>			
GENERAL PARTNER 26North Partners GP LLC				
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.				

\$52.50

\$8.75

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Page 1



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

DELAWARE, DO HEREBY CERTIFY "26NORTH HOLDINGS 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 TWENTY-THIRD DAY OF JANUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "26NORTH HOLDINGS"

LP" WAS FORMED ON THE TWENTY-NINTH DAY OF AUGUST, A.D. 2022.

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



Authentication: 202644861

Date: 01-23-24