

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : USACORP INC.
Account Number : I20130000019
Phone : (718)362-4789
Fax Number : (718)408-2550

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: office@oakbridgeholdings.com

FLORIDA/FOREIGN LP/LLP
Pine Ridge Park LP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,000.00

Electronic Filing Menu

Corporate Filing Menu

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JUL 18 2024

K. Brumbley

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2024 JUN 19 PM 1:14

DEPT. OF STATE
DIVISION OF CORPORATIONS
ELECTRONIC FILING

2024 JUN 19 PM 3:19

APPROVED
AND
FILED

((H24000245478 3)))

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

1. Pine Ridge Park 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.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. 09/12/2023

Date of Formation

4. Federal Employer Identification Number: 93-3500209

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

Nationwide Registered Agents Corp.

7064 Northwest 49th Street

Lauderhill, FL 33319

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.

is: Joseph Strauss

Signature of Registered Agent

7. Principal Office:

36 Charming Way

Lakewood, NJ 08701

8. Mailing Address:

36 Charming Way

Lakewood, NJ 08701

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: Moishe Goldshmidt

Name of General Partner: _____

Street Address: 36 Charming Way

Street Address: _____

Lakewood, NJ 08701

Mailing Address: 36 Charming Way

Mailing Address: _____

Lakewood, NJ 08701

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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CLERK OF SUPERIOR COURT
JESSICA L. BROWN

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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 19th day of July, 2024

/s/ Moishe Goldshmidt
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

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PINE RIDGE PARK 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 JULY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PINE RIDGE PARK
LP" WAS FORMED ON THE TWENTIETH DAY OF SEPTEMBER, A.D. 2023.

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



2382822 8300

SR# 20243184757

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

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.

Authentication: 203966128

Date: 07-19-24

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