Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITAL LEGAL GROUP PA

Account Number : I20210000025 Phone : (305)676-0924

Fax Number : (305)676-0924

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

Email	Address:	

FLORIDA/FOREIGN LP/LLLP

North Commerce Parkway Capital LP

Certificate of Status	()
Certified Copy	0
Page Count	04
Estimated Charge :	\$1,000.00

Electronic Filing Menu Corporate Filing Menu

Help

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COVER LETTER

TO:	Registration Section Division of Corporations		
SERI	ECT: North Commerce Parkway Capital LP		
.,(,1,4,1	Name of Foreign Limited Parts	ership or Limite	d Liability Limited Partnership
partne	nclosed application, certificate of status and fe rship to transact business in Florida. return all correspondence concerning this ma		to register a foreign limited partnership or limited liability limited
Laure	n Shapiro		
	Contact Person		_
Capita	d Legal Group PA		
	Firm/Company		_
11104	Brickell Avenue, Suite 505		
	Address		_
Miam	i. FL 33431		
	City. State and Zip Code		
	olglaws.com		
E-m	ill address; (to be used for future annual repor	(notification)	_
For fur	ther information concerning this matter, pleas	e call;	
Laurei	a Shapiro	305 at r	676-0924
	Name of Contact Person	Area Code	and Daytime Telephone Number
Enclos	ed is a check for the following amount:		
(\$9	00.00 Filing Fee and and Certificate of Status:	□S1.052.50 Fi and Certifie	
	MailingAddress: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		StreetAddress: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

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

L. North Commerce Parkway Capital LP	
Acceptable Limited Partnership suffixes: Limited	ed Linbility Limited Partnership, which must include suffix} Partnership, Limited, L.P., LP, or Ltd. suffixes: Limited Liability Limited Partnership, L.L.L.P, or LLLP.
	ed partnership or limited liability limited partnership proposes to register to transact in Florida; must contain acceptable suffix.
2. Delaware	3, 12/13/2022
State or Country of Formation	
4. Federal Employer Identification Number $\frac{92}{2}$	1360611
5. Name of Registered Agent for Service of Proc RK Capital Management LLC	
2500 Weston Road, Suite 211	_
Weston, Ft. 33331	
	gent and agree to act in this capacity. I firther agree to comply with the grovisions to performance of my duties, and I am familiar with and accept the obligations of Signature of Registered Agent.
7. Principal Office:	8. Mailing Address: - 명 공연
2500 Weston Road	8. Mailing Address: 고 유학 2500 Weston Road 고 유학
Suite 211	8. Mailing Address: 2500 Weston Road Suite 211 Suite 211
Weston, FL 33331	Weston, Pt. 33334
9. If limited partnership is a limited liability fin	nited partnership, check box.
10. Name, principal office address, and mailing	address of each general partner;
Name of General Partner: NCPC GP LLC	Name of General Partner:
Street Address: 2500 Weston Road, Suite 211	Street Address:
Weston, FL 33331	
Mailing Address: 2500 Weston Road, Suite 21	Mailing Address:
Mailing Address: 2500 Weston Road, Suite 213 Weston, FL 33334	Mailing Address:
Mailing Address: Weston, FL 33334	
Mailing Address: Weston, FL 33331 Name of General Partner:	Name of General Partner: Street Address:

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17865132898

From: Lauren Shapiro

(((1124000247273.3))))

Page 1 of 2

Name of Gene	ral Partner:	Name of General Partner:	
Street Address:		Street Address:	
Mailing Addre	(88)	Mailing Address;	
(Effective date can Note: If the date in document's effecti 12. Attached is a co	not be prior to nor more than 90 days iserted in this block does not meet the ve date on the Department of State's is criticate of existence duly authenticate of State, by the Secretary of State or	after the date this document is filed by the Florida Department of State.) applicable statutory filing requirements, this date will not be fisted as the ecords. ed, not more than 90 days prior to the delivery of this application to the other official having custody of the entity's records in the jurisdiction under	
	day of July	.20 24	
		JUA .	
	Sig	mature of a general partner	
The individual sign submitted in a doct	ting this document affirms that the fac iment to the Department of State cons	ts stated herein are true and the individual is aware that false information titutes a third degree felony as provided for in \$ 817.155, F.S.	
(filing Eves: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (8965 Filling Fee and \$35 Registered Agent Fee) \$52.50 \$8.75	

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "NORTH COMMERCE PARKWAY CAPITAL 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-SECOND DAY OF JULY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NORTH COMMERCE PARKWAY CAPITAL LP" WAS FORMED ON THE THIRTEENTH DAY OF DECEMBER, A.D. 2022.

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

Authentication: 203974434

Date: 07-22-24