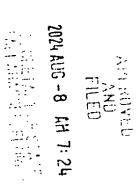
# B2400000249

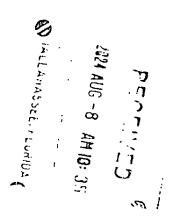
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





200434194472





7.09 0 8 2024 K. Brumbley



### **CT CORP**

4.7

#### (850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

08/08/2024

Date:

	Acc#I20160000072				
Name:	The Griffin AL LP				
Document #:					
Order#:	15806163				
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:	- 1-2 FILING - LLC 1ST - LP 2nd				
Certified Copy of					
Apostille/Notarial Certification:	Country of Destination:  Number of Certs:				
Filing: 🗸	Certified: ✓ Email Address for Annual Report Notifications  Plain:				
Availability  Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 1052.50				

Thank you!

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

, The Griffi	in AL LP				
Acceptable Limite	f Limited Partnership or Limited Liabili ed Partnership suffixes: Limited Partnershi ed Liability Limited Partnership suffixes: L	ip, Limite	d, L.P., LP, or Ltd.		
If name unavaila	able, name under which the limited partners business in Florida	ship or lin	nited liability limited partnership ntain acceptable suffix.	proposes to regist	er to transact
, Delaware	2.00		07-AUG-2024		
<u></u>	State or Country of Formation		Date of Forma	tion	
4. Federal Emplo	oyer Identification Number.		<del></del>		
C T Cor	poration System	'lorida St	reet Address:		
	Pine Island Road ion, FL 33324				
of all statutes	of the appointment as registered agent and a relative to the proper and complete perform registered agent.	nance of n	ct in this capacity. I further agn my duties, and I am familiar with Kathryn A. Widdoes - Assist stered Agent	i and accept the ob	the provisions digations of
	Signatur	e of Regi	stered Agent		
7. Principal Offi 4890 W. Ke	ce: ennedy Blvd., Suite 900		ling Address:  O W. Kennedy Blvd.,		
Tampa, FL 33609			npa, FL 33609	DZ4 AUG	-
					m, di
	tnership is a limited liability limited part				LED AND KOAU
	ipal office address, and mailing address of Griffin AL GP LLC	<u> </u>	eneral partner: Name of Gen Ptr.:	7: 2 <b>1</b>	
Street Address:	4890 W Kennedy Blvd., #9	00	Street Address:	·	
	Tampa, FL 33609				47 -
Mailing Address:	4890 W Kennedy Blvd., #9	000	Mailing Address:		
	Tampa, FL 33609				
Name of General	Partner:	<del></del>	Name of General Partner:		
Street Address:			Street Address:		
Mailing Address	:		Mailing Address:		

Mailing Address:

			Page I of			
Name of Gen	eral Partner:		Nar	ne of General Pa	artner:	
Street Addres	ss:		Stre	et Address:		
Mailing Addi	<del></del>			ling Address:		
11. <b>Effective dat</b> ( <i>Effective date ca</i>	e, if other than the dat nnot be prior to nor mo	te of filing: ore than 90 days afte	er the date thi	s document is fil	led by the Florida Department of State.)	
12. Attached is a Florida Departme the law of which	ent of State, by the Secre	duly authenticated, etary of State or oth	not more than er official hav	n 90 days prior to ving custody of t	the delivery of this application to the he entity's records in the jurisdiction under	
	7thday	of August		2024		
Signed ans	uay	By: The Griffin A	L GP LLC		*	
		By: /s/ Joseph G.	_ubeck			
	Joseph G. Lubeck, President					
The individual signature submitted in a do	gning this document aff cument to the Departme	firm that the facts st ent of State constitu	ated herein ar tes a third de	e true and the inc gree felony as pr	dividual is aware that false information ovided for in s.817.155, F.S.	
	Filing Fees:				e and \$35 Registered Agent Fee)	

Page 2 of 2

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "THE GRIFFIN AL 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 SEVENTH DAY OF AUGUST, A.D. 2024.

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

Authentication: 204108311

Date: 08-07-24