

D19000000047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

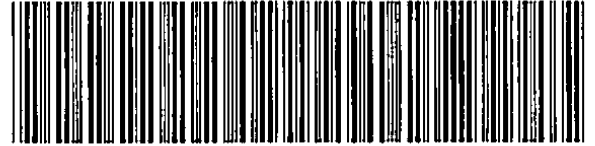
Certified Copies _____ Certificates of Status _____

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AUG 15 2019



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08/16/19--01002--019 **358.75

19 AUG 15 PM 5:01

19 AUG 15 AM 3:48

FILED



Filing Cover Sheet

To: Florida Division of Corporations

From: Kim Tadlock c/o Capitol Services, Inc.

Date: 8/15/2019

Trans#: 1068487

Entity Name: CITRUS PARK HOTEL DST

Articles Incorporation ()

Articles of Dissolution ()

Conversion ()

Foreign Qualification ()

Limited Partnership ()

Reinstatement ()

Articles of Amendment ()

Annual Report ()

Fictitious Name ()

Limited Liability ()

Merger ()

Withdrawal / Cancellation ()

Other (XX - TRUST FILING)

STATE FEES PREPAID WITH CHECK #1584 FOR \$358.75

PLEASE RETURN:

Certified Copy (XX) Plain Photocopy ()

Good Standing ()

Certificate of Fact ()

**AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE
TO FILE OR QUALIFY**

Citrus Park Hotel DST

A Delaware statutory **TRUST**

In accordance with Section 609.02 of the Florida Statutes, pertaining to
Common Law Declarations of Trust, the undersigned, the Chairman of the
Board of Trustees of Citrus Park Hotel DST, a

(Name of Trust)

Delaware statutory Trust hereby affirms in order to file or qualify

(State)

Citrus Park Hotel DST, in the State of Florida.

(Name of Trust)

1. Two or more persons are named in the Trust.

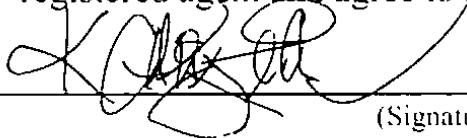
2. The principal address is 1201 N. Orange St., Suite 7044

Wilmington, DE 19801

3. The registered agent and street address in the State of Florida is:
InCorp Services, Inc.

17888 67th Court North, Loxahatchee, FL 33470

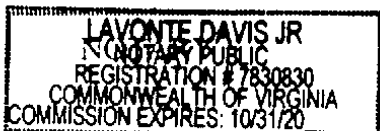
4. Acceptance by the registered agent: Having been named as registered
agent to accept service of process for the above named Declaration of Trust
at the place designated in this affidavit, I hereby accept the appointment as
registered agent and agree to act in this capacity.



Kathy Shin on behalf of InCorp Services, Inc.

(Signature of Registered Agent)

5. I certify that the attached is a true and correct copy of the Declaration of
Trust under which the association proposes to conduct its business in
Florida.



Chris Sorensen
Name: Chris Sorensen

Manager of Sorensen Entity Services LLC, a trustee

Filing Fee: **\$350.00**

Certified Copy: **\$ 8.75 (optional)**

CR2E063(3/00)

19 AUG 15 AM 3:40

FILED

Delaware

The First State


Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS ON FILE OF "CITRUS PARK HOTEL DST" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF STATUTORY TRUST REGISTRATION, FILED THE TENTH DAY OF JULY, A.D. 2019, AT 3:22 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID STATUTORY TRUST, "CITRUS PARK HOTEL DST".



Jeffrey W. Bullock, Secretary of State

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SR# 20196537647

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

Authentication: 203416271
Date: 08-15-19

State of Delaware
Secretary of State
Division of Corporations
Delivered 03:22 PM 07/10/2019
FILED 03:22 PM 07/10/2019
SR 20195900765 - File Number 7509075

STATE *of* DELAWARE CERTIFICATE *of* TRUST

This Certificate of Trust is filed in accordance with the provisions of the Delaware Statutory Trust Act (Title 12 of the Delaware Code, Section 3801 et seq.) and sets forth the following:

• **First:** The name of the trust is Citrus Park Hotel DST

• **Second:** The name and address of the Delaware trustee is

Sorensen Entity Services LLC, located at 1201 N. Orange Street, Suite 7044,
Wilmington, Delaware 19801-1189.

• **Third:** (Insert any other information the trustees determine to include therein.)

SORENSEN ENTITY SERVICES LLC

By: 
Trustee(s)

Chris Sorensen, Manager of Sorensen
Name: Entity Services LLC, the Delaware Trustee
Typed or Printed

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2019