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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

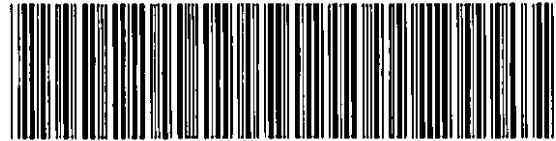
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Filing Cover Sheet

To: Florida Division of Corporations

From: LESLIE SELLERS C/O Capitol Services, Inc.

Date: 11/3/2020

Trans#: 1157382

Entity Name: CS1031 WHISPERING PINES MHC, DST

Articles Incorporation ()

Articles of Dissolution ()

Conversion ()

Foreign Qualification (XXX) *TRUST

Limited Partnership ()

Reinstatement ()

Other ()

Articles of Amendment ()

Annual Report ()

Fictitious Name ()

Limited Liability ()

Merger ()

Withdrawal / Cancellation ()

STATE FEES PREPAID WITH CHECK #1983 FOR \$367.50

PLEASE RETURN:

Certified Copy (XXX) Plain Photocopy ()

Good Standing (XXX) Certificate of Fact ()

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

CS1031 WHISPERING PINES MHC, 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 CS1031 WHISPERING PINES MHC, DST, a

(Name of Trust)

Delaware statutory Trust hereby affirms in order to file or qualify

(State)

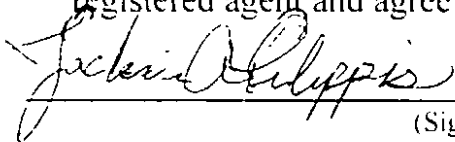
CS1031 WHISPERING PINES MHC, DST, in the State of Florida
(Name of Trust)

1. Two or more persons are named in the Trust.
2. The principal address is 10900 Nuckols Rd, Suite 200
Glen Allen, VA 23060

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.



Jackie DeFilippis 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.

Name: Chris Sorensen

Manager of Sorensen Entity Services LLC, a trustee

County/City of Chesapeake

Commonwealth/State of Virginia

Filing Fee: **\$350.00**

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

The foregoing instrument was subscribed and sworn before me this 30 day of Oct

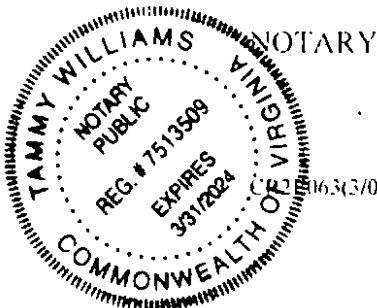
2020 by

Christopher Sorensen

(Name of person seeking acknowledgement)

Tammy Williams

Notary Public



6.3(3/00)

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 "CS1031 WHISPERING PINES MHC, DST" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF STATUTORY TRUST REGISTRATION, FILED THE TWENTY-THIRD DAY OF OCTOBER, A.D. 2020, AT 3:42 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, "CS1031 WHISPERING PINES MHC, DST".



3973699 8100H
SR# 20208042424

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.

Jeffrey W. Bullock, Secretary of State

Authentication: 203941441
Date: 10-26-20

CERTIFICATE OF TRUST

OF

CS1031 WHISPERING PINES MHC, DST

This Certificate of Trust of (the "Trust") is being duly executed and filed by the undersigned, to form a statutory trust under the Delaware Statutory Trust Act (12 Del.C. sec. 3801 et seq.).

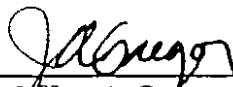
1. The name of the statutory trust formed by this Certificate of Trust is

CS1031 WHISPERING PINES MHC, DST


2. The name and business address of the Delaware Trustee in the State of Delaware is Sorensen Entity Services LLC, 1201 N. Orange St., Suite 7044, Wilmington, DE 19801.
3. This Certificate of Trust shall be effective as of the date of filing by the Delaware Secretary of State.

IN WITNESS WHEREOF, the undersigned, being the Trustee of the Trust, has executed this Certificate of Trust as of October 23, 2020.

TRUSTEE:

By: 
Jeffrey A. Gregor,
Authorized Person

Sorensen Entity Services LLC,
not in its individual capacity but solely as Delaware trustee

By: 
Chris Sorensen,
Manager of Sorensen Entity Services LLC

2020 NOV -3 AM 11:40
FILED

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CS1031 WHISPERING PINES MHC, DST" 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-SIXTH DAY OF OCTOBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CS1031 WHISPERING PINES MHC, DST" WAS FORMED ON THE TWENTY-THIRD DAY OF OCTOBER, A.D. 2020.



3973699 8300

SR# 20208042361

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203941414

Date: 10-26-20