

D2100000000B8

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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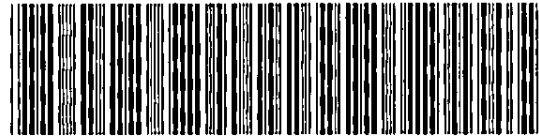
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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To: Florida Division of Corporations

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

Date: 9/20/2021

Trans#: 1232989

Entity Name: CS1031 RESIDENCES AT 393 NORTH APARTMENTS, DST

Articles Incorporation ()

Articles of Dissolution ()

Conversion ()

Foreign Qualification ()

Limited Partnership ()

Reinstatement ()

Other (XXX) **DECLARATION OF TRUST

Articles of Amendment ()

Annual Report ()

Fictitious Name ()

Limited Liability ()

Merger ()

Withdrawal / Cancellation ()

STATE FEES PREPAID WITH CHECK #2357 FOR \$367.50

PLEASE RETURN:

Certified Copy (XXX) Plain Stamped Copy ()

Good Standing (XXX) Certificate of Fact ()

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

CS1031 RESIDENCES AT 393 NORTH APARTMENTS, 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 RESIDENCES AT 393 NORTH APARTMENTS, DST a

(Name of Trust)

Delaware statutory Trust hereby affirms in order to file or qualify
(State)

CS1031 RESIDENCES AT 393 NORTH APARTMENTS, 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:

Capitol Corporate Services, Inc.

515 E. Park Avenue, 2nd Floor

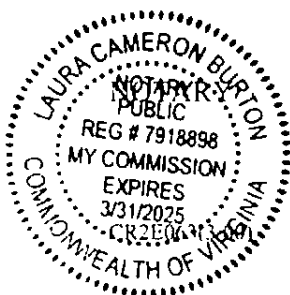
Tallahassee, FL 32301

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.

Taylor Seay Taylor Seay, as Asst. Secretary on behalf of
Capitol Corporate 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)**

County/City of Chesterfield
Commonwealth/State of Virginia

The foregoing instrument was acknowledged
before me this 15 day of September

2021 by Christopher Sorensen
(Name of person seeking acknowledgment)

Laura Cameron Burton
Notary Public
My Commission Expires: 3/31/25

Delaware

The First State

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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 RESIDENCES AT 393 NORTH APARTMENTS, DST" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF STATUTORY TRUST REGISTRATION, FILED THE THIRTEENTH DAY OF SEPTEMBER, A.D. 2021, AT 1:44 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 RESIDENCES AT 393 NORTH APARTMENTS, DST".




Jeffrey W. Bullock, Secretary of State

CERTIFICATE OF TRUST

OF

CS1031 RESIDENCES AT 393 NORTH APARTMENTS, 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 Residences at 393 North Apartments, 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 September 13, 2021.

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

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