

024000000003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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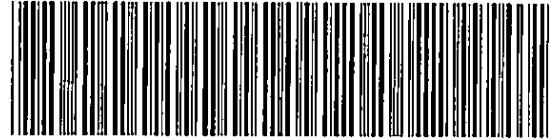
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CALLAHAN, ST. LOUIS, MISSOURI  
FLORIDA

**CT CORP**  
**(850) 656-4724**  
**3458 lakesore Drive**  
**Tallahassee, FL 32312**

**Date:** 01/11/2024

Acc#I20160000072

*en: c SW*

Name:	Citrus Park Hotel DST
Document #:	
Order #:	15322297 - 1

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
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Amount: \$ **350.00**

Thank you!

**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 c/o Virtua Partners (US), LLC  
17470 N. Pacesetter Way, Scottsdale, AZ 85255
3. The registered agent and street address in the State of Florida is:  
Corporation Service Company, 1201 Hays St., 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.

*Torsha Flores*

Torsha Flores, Assistant Secretary

(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.

-- See following page --

NOTARY

Name: Chris Sorensen, manager  
of Sorensen Entity Services, the  
Delaware Trustee

Filing Fee: \$350.00  
Certified Copy: \$ 8.75 (optional)

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

Citrus Park Hotel DST

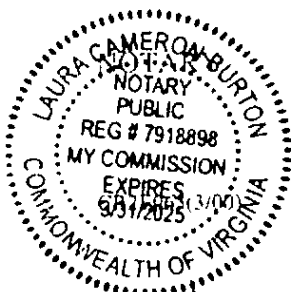
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\_\_\_\_\_  
(Signature of Registered Agent)

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Florida.



\_\_\_\_\_  
Name: Chris Sorensen

Manager of Sorensen Entity Services LLC, the Delaware Trustee

Filing Fee: \$350.00

Certified Copy: \$ 8.75 (optional)

by City of Chesterfield  
County/State of Virginia

The foregoing instrument was acknowledged  
before me this 12 day of January  
2024

by Christopher Sorensen  
(Name of person seeking acknowledgement)

Laura Burton  
Notary Public

My Commission Expires: 3/31/2025

I was commissioned a notary public  
by Laura Cameron Burton