# F19000003789

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

Office Use Only



100332957251



Z BROWN AUG 1 6 2019 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	I20000000195
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REFERENCE : 885497 5041943

AUTHORIZATION : Spelle Rec

COST LIMIT : \$ 70.00

ORDER DATE : August 14, 2019

ORDER TIME : 8:35 AM

ORDER NO. : 885497-010

CUSTOMER NO: 5041943

#### FOREIGN FILINGS

NAME: FPG TULIP, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:



ROBERT BUKALA Chief Executive Officer Direct: (407) 680-2688 Mobile: (407) 607-6094

FPG TULIP, LP

August 14, 2019

Delaware Division of Corporations 401 Federal Street - Suite 4 Dover, DE 19901

Re: Consent to Use of FPG Tulip, Inc.

Dear Sir or Madam:

I am Chief Executive Officer of FPG Tulip, LP and its General Partner FPG Corporate Holdco, Inc.

This correspondence serves as permission for FPG Tulip, Inc. to use and incorporate under the name FPG Tulip.

Thank you for your assistance.

Sincerely,

Robert Bukala

### **COVER LETTER**

TO: Registration Opinion of	on Section  f Corporations			
FPG	Tulip, Inc.			
SUBJECT:	Name	of corporation	- must include suffix	
Dear Sir or Madai	<b>1</b> :			
"Certificate of Ex	plication by Foreign C stence," or "Certificat foreign corporation to	te of Good Star	Authorization to Transanding" and check are subsets in Florida.	ct Business in Florida," omitted to register the
Please return all c Jessica Hansbury	orrespondence concern	ning this matte	r to the following:	
		Name of	Person	
Foundation Partner	Group, LLC			
		Firm/Con	npany	
4901 Vineland Ros	d, Suite 300			
		Addr	ess	
Orlando, FL 32811				
	-	-	nd Zip code	
Jessica.Hansbury@	foundationpartners.com			
	E-mail addre	ss: (to be used	for future annual report	notification)
For further inform	ation concerning this	matter, please	call:	
Jessica Hansbury		407	680-2766	
Name of	Person	_ at ( Area Coo	le Daytime Telep	phone Number
Registrat Division Clifton B 2661 Exe	COURIER ADDRE on Section of Corporations uilding cutive Center Circle ee, FL 32301	SS:	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section forporations 7
Enclosed is a che	ck for the following ar	nount:		
☐ \$70.00 Filing	Fee	_	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(If name unaveil	able in Florida, enter alternate corporate name ac	dented for the number of transporting has	ineco in Florida)
Delaware	ante in a torida, enter attenuate corporate italife at	topical for the purpose of transacting ous	mess in Fiorida)
	y under the law of which it is incorporated) 3.	(FEI number, if applical	
(State or countr			ole)
	5	ndefinite	
(Date of incorporation) 5.		(Date of duration, if other than perpetual)	
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		-
4901 Vineland R	oad, Suite 300, Orlando, FL 32811	2, r.s., to determine penalty hability)	
		1 - 07 11	·- · - · · · · · · · · · · · · · · · ·
4901 Vineland R	(Principa oad, Suite 300, Orlando, FL 32811	l office address)	
		11 101100	<u> </u>
	(Current maining	address, if different)	4
Managard at	diama of Placial and the control of the	Day MOOD - 1110	
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	* · · ·
Name:	Corporation Service Company		***
ffice Address:	1201 Hays Street		
Trice Address:	Tallahassee	<del></del> 32301	
	Tallaliassee	, Florida	
	(City)	(Zip code)	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

## 11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: \_\_\_\_\_ Vice Chairman: Address: Director: Address: \_\_\_\_ Director: \_\_\_ Address: **B. OFFICERS** Robert J. Bukala President: 4901 Vineland Road, Suite 300, Orlando, FL 32811 Address: \_\_ Richard Benton Vice President: 4901 Vineland Road, Suite 300, Orlando, FL 32811 Address: \_\_\_\_\_\_ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Wees Auch Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Robert J. Bukala President



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

DELAWARE, DO HEREBY CERTIFY "FPG TULIP, INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FIFTEENTH DAY OF AUGUST, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FPG TULIP, INC."

WAS INCORPORATED ON THE FOURTEENTH DAY OF AUGUST, A.D. 2019.

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



Authentication: 203413957

Date: 08-15-19