

L220000346722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

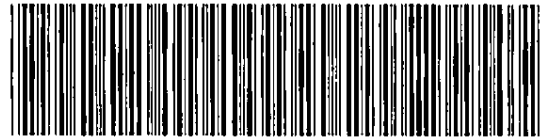
(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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S. CHATHAM

AUG - 9 2022

FILED
TALLAHASSEE, FLORIDA

2022 JUL 27 PM 3:32

22 JUL 27 AM 4:20



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2022

CORPORATION SERVICE COMPANY

,

SUBJECT: TPG IMPERIAL HOUSE, LLC
Ref. Number: W22000099879

We have received your document for and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham
Regulatory Specialist II
New Filing Section

Letter Number: 322A00017154

22 JUL 27 4:20 PM '22

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 833552 7867824

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 130.00

ORDER DATE : July 25, 2022

ORDER TIME : 1:57 PM

ORDER NO. : 833552-005

CUSTOMER NO: 7867824

DOMESTIC FILING

NAME: TPG IMPERIAL HOUSE, LLC

COMPANY

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS:

22 JUL 27 4:20

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: TPG Imperial House LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William K. Phillips

Name of Person

Firm/Company

4533 Province Line Rd.

Address

Princeton, NJ 08540

City/State and Zip Code

wkphillips@tpglaws.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William K. Phillips

917

282-4970

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

22 JUL 29 10:41:20

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TPG Imperial House LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4533 Province Line Rd.
Princeton, NJ 08540

Mailing Address:

4533 Province Line Rd.
Princeton, NJ 08540

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Corporation Service Company
Name

1201 Hays Street

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee	FL	32301
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Christopher Wind, MVP
Registered Agent's Signature (REQUIRED)

(CONTINUED)

22 JUL 27 AM 4:20

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Christina Phillips
4533 Province Line Rd.
Princeton, NJ 08540

AMBR

Christina Phillips
4533 Province Line Rd.
Princeton, NJ 08540

AMBR

William K. Phillips
533 Province Line Rd.
Princeton, NJ 08540

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



William Phillips (Aug 5, 2022 21:54 GMT-7)

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

William K. Phillips

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

22 JUL 22 AM 1:27
FILED