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(Document Number)						
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EXAMINER



RESUBMIT

Please give original submission date as file date.

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 30, 2018

.

CSC ROXANNE TURNER TALLAHASSEE, FL

SUBJECT: CH RETAIL FUND II/JACKSONVILLE STRAND, L.L.C.

Ref. Number: W18000078606

We have received your document for CH RETAIL FUND II/JACKSONVILLE STRAND, L.L.C. and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

Please list the title for RETAIL MANAGER II, L.L.C.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Tammi Cline Regulatory Specialist III

Letter Number: 218A00018054

18 SEP -4 PM 1:4

www.sunbiz.org

C DO DOV COOR BUILD DI CO

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

ACCOUNT NO. : 12000000195							
REFERENCE : 368290 7814304							
AUTHORIZATION: Spullede man							
COST LIMIT : \$ 125.00							
ORDER DATE: August 29, 2018	_						
ORDER TIME : 3:23 PM							
ORDER NO. : 368290-005							
CUSTOMER NO: 7814304	:						
ىئە ھى: 	· 						
FOREIGN FILINGS							
NAME: CH RETAIL FUND II/JACKSONVILLE STRAND, L.L.C.							
XXXX QUALIFICATION (TYPE: <u>LL</u>)							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING							
CONTACT PERSON: Roxanne Turner EXT# 62969							
EXAMINER:							

COVER LETTER

TO:	Registration Section Division of Corporation	ns			•		
SUBJE		l/Jacksonville Strand, L.L.C.					
SCENE		Name of	Limited Liability (Company		•	
The enc Existence	losed "Application by Force, and check are submitted	reign Limited Liability Comp ed to register the above refere	oany for Authoriza enced foreign limit	tion to Tra ed liability	nsact Business in Florida, company to transact business	' Certificate of ness in Florida	
Please re	cturn all correspondence	concerning this matter to the	following:				
		De	enise Cottle				
	· · · · · · · · · · · · · · · · · · ·	N	atne of Person			,	
	Crow Holdings Capital Partners, L.IC.						
	Firm/Company						
3819 Maple Avenue							
Address							
	Dallas, Texas 75219						
	City/State and Zip Code						
	dcottle@crowholdings.com						
		E-mail address: (to be used	for future annual	report not	ification)		
For furt	ner information concernin	g this matter, please call:					
	Da	ivid Crites	214	١	661-8228		
	Name (of Contact Person	Area Code	Day	time Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301		
Enclose	d is a check for the follow ☐ \$125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	acksonville Strand, L.L.C.	ude "Limited Liability Company," "L.L.C.,	or "TYC"
(Name of Por	eigh Limited Lisbility Company, must mer	ude Ellinied Elability Company, D.D.C.,	or Ebc. 7
(If name unavailable, enter al Liability Company," "L.L.C,		ansacting business in Florida. The alternate	name must include "Limited
2. Delaware	3	. (FEI number, if applica	
company is organized)	of which foreign limited liability	(FEI number, if applica	ıble)
4. Upon filing			
	(Date first transacted business in (See sections 605.0904 & 605.0905.	Fibrida, it prior to registration.) F.S. to determine penalty liability)	
5	3819 Maple Avenue, Dallas, Te		w
 -			
	(Street Address of Princi	pal Office)	— AC
6.	3819 Maple Avenue, Dallas, To	exas 75219	» 2
			<u> </u>
	(Mailing Addre	ss)	ا الله اق: ۵۹
7 - 31 4 - 4 4 - 4	ss of Florida registered agent: (P.O. B	ov NOT pecentable)	· 5
	Corporation Service Company	ox <u>in or</u> acceptable)	Q a
Name:			
Office Address:	1201 Hays Street	····	
	Tallahassee	Florida 32301 (Zip code)	-
designated in this applica to complywith the provision	gistered agent and to accept service of tion, I hereby accept the appointment	of process for the above stated limited list as registered agent and agree to act in er and complete performance of my du	iability company at the place 1 this capacity. I further agree
	(Registered a	igent's signature)	
	acity and address of the person(s) who L.C., 3819 Maple Avenue, Dallas, Tex		
9. Attached is a certificate jurisdiction under the law of the translator must be so	of which it is organized. (If the certific ubmitted)	d, duly authenticated by the official have cate is in a foreign language, a translation	ing custody of records in the on of the certificate under oath
This do assessed in the desired		(1) (b), Florida Statutes. I am aware that	any false information
submitted in a document to	o the Department of State constitutes a	third degree felony as provided for in s.	817.155, F.S.

Anna O. Graves, Vice President of Retail Managers II, L.L.C. manager of CHille Fail

Typed or printed name of signer Fund II Lecks on V. He Strand, L. L.C.

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CH RETAIL FUND II/JACKSONVILLE STRAND,

L.L.C." 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-NINTH DAY OF AUGUST, A.D.

2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CH RETAIL FUND II/JACKSONVILLE STRAND, L.L.C." WAS FORMED ON THE TWENTY-NINTH DAY OF AUGUST, A.D. 2018.

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

Authentication: 203335178

Date: 08-29-18

7035480 8300 SR# 20186419911