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12/16/2020

r	Date:	12/16/2020	
		Acc#I2016000007	12 4: C) W
Name:	PKY-SP	CLERMONT JV, LLC	
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COVER LETTER

Divisi	on of Corporation	18				
F SUBJECT:	KY-SP Clermont J	V, LLC				
			Limited Liability C	Company		
The enclosed " Existence, and	Application by For check are submitte	eign Limited Liability Com d to register the above refer	pany for Authoriza enced foreign limit	tion to Tra ed liability	nsact Business in Florida." Certive company to transact business in	ificate of Florida.
Please return a	II correspondence o	oncerning this matter to the	following:			
	A. Noni Holmo	s-Kidd				
		N	ame of Person			
	Parkway Prope	rty Investments, LLC				
	.	F	irm/Company	•		
	800 N. Magnol	ia Avenue, Suite 1625				
			Address			
	Orlando, FL 32	803				
		City/S	State and Zip Code	-		
	nklopotek@pky.	com				
		E-mail address: (to be use	d for future annual	report not	ification)	
For further info	ormation concernin	g this matter, please call:				
A. N	oni Holmes-Kidd		407 ai (541-59 _)		
	Name o	of Contact Person	Area Code	Day	time Telephone Number	
Divis Regis P.O. I	LING ADDRESS: ion of Corporations tration Section Box 6327 hassee, FL 32314			Division Registrat Clifton B 2661 Exc	ADDRESS: of Corporations ion Section uilding centive Center Circle see, FL 32301	
	theck for the follow 25.00 Filing Fee	ring amount: \$\Boxed{\text{\$\subset\$}} \text{\$\subset\$} \text{\$\subset\$} \text{\$\subset\$} \text{\$\cent{\$\subset\$}} \text{\$\subset\$} \$\s	□ \$155.00 Filii Certified Copy	-	☐ \$160.00 Filing Fee, Certific of Status & Certified Copy	ate

.

Registration Section

TO:

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 FOREGN. LIMITED LIABILITY COMPANY TO TRANSACT RUSINESS. IN THE STATE OF FLORIDA:

1. PKY-SP Clermont JV	LLC in Limited Liability Company, must include "Limit	ed Liability Co	mpany," "L.L.C.," or "LLC.")		
(ae or vareng	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,		
If name unavailable, enter alternate	name adopted for the purpose of transacting business in Floring	orida. The alterna	te name must include "Limited Liab	ulity Company," "L.I. C," or "LI.C	;"}
2 Delaware	which foreign limited liability company is organized)	3	(VV) much	per, if applicable)	
(Jurisdiction under the law of	which foreign limited liability company is organized)		(FE) namo	er, it applicable)	
4					
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	nine penalty liabil	ity)		
5. 800 N. Magnolia Av		6. <u>80</u>	0 N. Magnolia Avenue		
(Street Address o Suite 1625	f Principal Office)	Su	(Mailing Addr ite 1625	TAG 23	
Orlando, FL 32803			lando, FL 32803	—— F# 5	
Oriando, 112 52805			mileo, 1 13 3 2 0 0 3		1 !
7. Name and <u>street addr</u>	ess of Florida registered agent: (P.O. Bo	x <u>NOT</u> acce	ptable)	25 6	
Name:	C T Corporation System				Π;
Office Address:	1200 South Pine Island Road		<u> </u>	9	
	Plantation		, Florida 33324 (Zip cod	T. 60	
Registered agent's acco	(City)		(Zip cod	c)	
	By: C T Corporation System Donna Peterson-Riges, Assistant Secre (Registered agent)	s signature)	Dontil		
8. The name, title or ca <u>Title or Capacity:</u>	pacity and address of the person(s) who have and Address:	ias/nave auti <u>Title</u>	ority to manage 15/are: or Capacity:	Name and Address:	
CEO	Jim Heistand	CFO		Scott Francis	
	800 N. Magnolia Ave #1625 Orlando, FL 32803			800 N. Magnolia Ave	e#1625
VP & Gen Counsel	A. Noni Holmes-Kidd				
	800 N. Magnolia Ave #1625 Orlando, Fl. 32803				
(Use attachments if nec	essary)				
9. Attached is a certifica jurisdiction under the lar of the translator must be	ate of existence, no more than 90 days old w of which it is organized. (If the certifical submitted)	, duly auther are is in a for	nticated by the official have reign language, a translat	aving custody of records tion of the certificate und	in the ler oath
10. This document is ex- submitted in a document	ecuted in accordance with section 605.020 to the Department of State constitutes a t	03 (1) (b), F hird degree	orida Statutes. I am awar felony as provided for in	re that any false informat s.817.155, F.S.	ion
	A. Abri				
		re of an authorize			
	A. Noni Holmes-Kidd				
	Typed	or printed name of	i signec		

Page 1



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

DELAWARE, DO HEREBY CERTIFY "PKY-SP CLERMONT JV, LLC" 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 THIRTY-FIRST DAY OF DECEMBER, A.D. 2020.

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

Authentication: 204455258

Date: 12-31-20