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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	-
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## FILE 2nd

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

	ACCOUNT NO.	: I2000000195
	REFERENCE	: 502884 4305966
	AUTHORIZATION	Spulleran
	COST LIMIT	: \$1,000.00
ORDER DATE :	November 9, 2020	
ORDER TIME :	1:14 PM	
ORDER NO. :	502884-035	
CUSTOMER NO:	4305966	
		· • • • • • • • • • • • • • • • • • • •

### FOREIGN FILINGS

NAME: TSO VENICE SELF STORAGE GENERAL PARTNER, LP

XXXX Q	UALIFICATI	ON (TYPE:	<u>LP</u> )		
PLEASE	RETURN THE	FOLLOWING A	S PROOF O	F FILING:	
XX	CERTIFIED PLAIN STA CERTIFICA		TANDING		
CONTACT	PERSON:	Eyliena Bake	r EXT#	61594	
			EXAMI	NER:	

### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: TSO Venice Self Storage Gene	eral Partner, LP	
Name of Foreign Limited I	Partnership or Limite	ed Liability Limited Partnership
The enclosed application, certificate of status ar partnership to transact business in Florida.  Please return all correspondence concerning this		to register a foreign limited partnership or limited liability limited
Jan R. Ezell, Corporate Paralegal		
Contact Person		<del>_</del>
Alston & Bird LLP		
Firm/Company		<del></del>
1201 West Peachtree Street		
Address		<del>_</del>
Atlanta, GA 30309-3424		
City, State and Zip Code		
compliancemail@cscglobal.com		
E-mail address: (to be used for future annual r	eport notification)	
For further information concerning this matter,	please call:	
Jan R. Ezeli	404 at (	881-7442
Name of Contact Person	Area Code	and Daytime Telephone Number
Enclosed is a check for the following amount:		
□\$1,000.00 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee) □\$1,008.75 Filing Fee Status		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

1. TSO Venice Self Storage General Partner, LP (Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix. 3. 11/5/2020 2. Georgia State or Country of Formation Date of Formation 4. Federal Employer Identification Number: 85-3801922 5. Name of Registered Agent for Service of Process and Florida Street Address: Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further ugree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of iny position as registered agent. Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 1170 Peachtree Street, Suite 2000 1170 Peachtree Street, Suite 2000 Atlanta, GA 30309 Atlanta, GA 30309 9. If limited partnership is a limited liability limited partnership, check box. 10. Name, principal office address, and mailing address of each general partner: Name of General Partner: TSO Venice Self Storage GP SPE, Inc. Name of General Partner: 1170 Peachtree Street, Suite 2000 Street Address: Street Address: Atlanta, GA 30309 Mailing Address:\_\_\_\_\_ Mailing Address: Name of General Partner:\_\_\_\_\_\_ Name of General Partner:\_\_\_\_\_ Street Address: Street Address: Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

### Page 1 of 2

Name of Gene	Name of General Partner: Name of General Partner:	
Street Address	s:	Street Address:
Mailing Addre	ess:	Mailing Address:
Effective date can Note: If the date it document's effecti 12. Attached is a c Florida Departmen	ascred in this block does not meet the a tive date on the Department of State's re- ertificate of existence duly authenticate at of State, by the Secretary of State or of	after the date this document is filed by the Florida Department of State.)  applicable statutory filing requirements, this date will not be listed as the
The individual sign	day of November  Sig (See anached ning this document affirms that the fact	nature of a general parener s stated herein are true and the individual is aware that false information
submitted in a doc	ument to the Department of State const	itutes a third degree felony as provided for in s.817.155, F.S.
(	Filing Fees: Certifled Copy (optional): Certificate of Status (optional):	\$1,900.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

Page 2 of 2

# ATTACHMENT TO APPLICATION FOR REGISTRATION FOR TSO VENICE SELF STORAGE GENERAL PARTNER, LP

### TSO VENICE SELF STORAGE GENERAL PARTNER, LP

By: TSO Venice Self Storage GP SPE, Inc., its General Partner

By: /s/ A. Boyd Simpson
A. Boyd Simpson, President

Control Number: 20217830

### STATE OF GEORGIA

### **Secretary of State**

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### TSO Venice Self Storage General Partner, LP a Domestic Limited Partnership

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 19810006 Date Inc/Auth/Filed: 11/05/2020 Jurisdiction : Georgia Print Date : 11/13/2020

Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State