Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000393744 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** ;

Email	Address:	

FLORIDA/FOREIGN LP/LLLP NADG NNN T-5 (FL) LP

Certificate of Status	1	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$1,008.75	

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

NADG NNN 1	[-5 (FL)	LP (
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	· - \ -/ -		
Acceptable Limited 1	Partnership suffices: Limited Partnership,	Limited Partnership, which must include sufficential, L.P., LP, or Ltd. nited Liability Limited Partnership, L.L.L.P. or LL	
If name unavailable		p or limited hability limited partnership proposes nust contain acceptable suffix	to register to transact
, Delaware		11/12/2020	
St	ate or Country of Formation	Date of Formation	 3
4. Federal Employe	r Identification Number: 85-387747	<u> </u>	
5. Name of Register	red Agent for Service of Process and Flo reations Network Inc.	rida Street Address:	157 16 0 157 16
801 US High	nway 1		
	Beach, FL 33408		4 6
6 I hereby accept the of all statutes relation as reg	ative to the proper and complete performa	ree to act in this capacity. I further agree to compare of my duties, and I am familiar with and acceps Saray Djidji, Special Secretary	ph with the provisions pt the obligations of
	Signature	of Registered Agent	
7. Principal Office:		8. Mailing Address:	
400 Clemati	s Street, Ste. 201	2851 John Street, Ste. One	·
West Palm E	Beach, 33401	Markham, Ontario L3R 5R7	
10. Name, principa	rship is a limited liability limited partners of office address, and mailing address of	each general partner:	
	Partner: NADG NNN T-5 (FL) GP L		
Street Address:	400 Clematis Street, Suite	Street Address:	
	West Palm Beach, FL 33		
Mailing Address	2851 John Street, Suite C	One Mailing Address:	
	Markham, Ontario L3R 5	<u> </u>	
Name of Genera	Partner:	Name of General Partner:	
Street Address:		Street Address:	
Mailing Address		Mailing Address:	

Name of General Partner:	Page 1 of 2 Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
12. Attached is a certificate of existence duly authentic Florida Department of State, by the Secretary of State the law of which it is greatized.	nys after the date this document is filed by the Florida Department of State.) cated, not more than 90 days prior to the delivery of this application to the or other official having custody of the entity's records in the jurisdiction under
Signed this 13th day of Nover	mber 20 20
	Signature of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual 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.

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

Page 2 of 2



Page 1

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

DELAWARE, DO HEREBY CERTIFY "NADG NNN T-5 (FL) LP" 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 THIRTEENTH DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NADG NNN T-5 (FL) LP" WAS FORMED ON THE TWELFTH DAY OF NOVEMBER, A.D. 2020.

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

Authentication: 204075224

Date: 11-13-20