



State of Rhode Island
Department of State - Business Services Division

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Statement of Registration

FOREIGN Limited Partnership

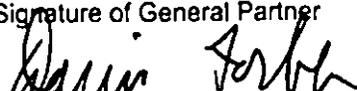
→ Filing Fee: \$100.00 minimum

Pursuant to the provisions of RIGL 7-13.1-1003, the undersigned foreign limited partnership hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited partnership is:		
MHC Property Management, L.P.		
The name, if different, which it elects to use in Rhode Island is:		
2. The limited partnership is organized under the laws of:	3. The date of its formation is:	
Delaware	May 19, 2015	
4. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:		
Property management services		
5. The name and address of the registered agent/office in Rhode Island is:		
Agent Name C T Corporation System		
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A		
City/Town East Providence	State RHODE ISLAND	Zip Code 02914
6. The Department of State is appointed the agent of the foreign limited liability partnership for service of process if, at any time, there is no registered agent or if the registered agent cannot be found or served following the exercise of reasonable diligence.		

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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7. The address, if applicable, of the office required to be maintained in the state or country of its organization is:		
8. The name and business address of each general partner is:		
GENERAL PARTNER	BUSINESS ADDRESS	
MHC Property Management GP, L.L.C.	2 N. Riverside Plaza, Suite 800, Chicago, IL 60606	
9. The address of the foreign limited partnership's principal place of business is:		
Address 2 N. Riverside Plaza, Suite 800		
City/Town Chicago	State IL	Zip Code 60606
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.		
11. Date when this Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY		
<input checked="" type="checkbox"/> Date received (upon filing)		
Later effective date (date must be no more than 90 days from the date of filing) _____		
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Registration, including any accompanying attachments, and that all statements contained herein are true and correct.</i>		
Type or Print Name of General Partner MHC Property Management GP, L.L.C.	Date 2/21/24	
Signature of General Partner 		

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MHC PROPERTY MANAGEMENT, L.P." 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 FEBRUARY, A.D. 2024.

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



5750277 8300

SR# 20240802389

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202916395

Date: 02-29-24