

A05000000558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

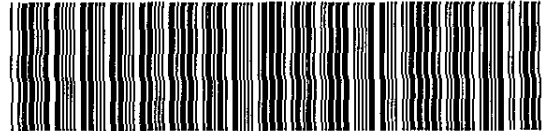
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Tom Larson
Requester's Name

Address

City/State/Zip

668-6611
Phone #

FILED
05 MAR 21 AM 7:57
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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Allison-Jacksonville Limited Partnership
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☐ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☒ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP
OF
ALLISON-JACKSONVILLE LIMITED PARTNERSHIP

Pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986), and §620.108 of the Florida Statutes, the undersigned, being the sole General Partner of ALLISON-JACKSONVILLE LIMITED PARTNERSHIP, hereby duly executes and files with the Florida Secretary of State this Certificate of Limited Partnership.

1. The name of the limited partnership is ALLISON-JACKSONVILLE LIMITED PARTNERSHIP.
2. The business address and the mailing address of the limited partnership is:
c/o Hearthstone, Inc., 16133 Ventura Boulevard, Suite 1400, Encino, California 91436.
3. The name of the registered agent for service of process required by §620.105 of the Florida Statutes is:

NRAI Services, Inc.

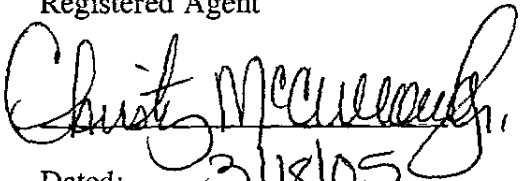
4. The Florida street address for the registered agent is:

2731 Executive Park Drive, Suite 4
Weston, FL 33331

5. Acceptance of Appointment of Registered Agent:

Having been named the statutory registered agent of ALLISON-JACKSONVILLE LIMITED PARTNERSHIP, at the place designated in this Certificate of Limited Partnership of ALLISON-JACKSONVILLE LIMITED PARTNERSHIP, I hereby accept such designation and confirm that I am familiar with and agree to accept the obligations imposed by §620.192 of the Florida Statutes and I agree to comply with the provisions of Florida Law relative to keeping the registered office open.

NRAI Services, Inc.,
Registered Agent

 ASST. Secy
Dated: 3/18/05

6. The name and business address of the general partner is as follows:

FL HHPII GP, L.C.
16133 Ventura Boulevard, Suite 1400
Encino, CA 91436

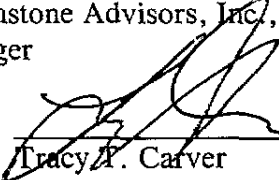
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7. The latest date upon which the limited partnership is to dissolve is March 15, 2055.

IN WITNESS WHEREOF, the undersigned, being the sole General Partner, has executed the foregoing Certificate of Limited Partnership on the 15th day of March, 2005, in accordance with §620.114 of the Florida Statutes.

FL HHPII GP, L.C.
a Florida limited liability company
General Partner

By: Hearthstone, Inc.,
a California corporation
dba in Florida as
Hearthstone Advisors, Inc.,
Manager

By: 
Tracy T. Carver
Executive Vice President-
General Counsel

AFFIDAVIT

THE UNDERSIGNED, constituting the sole General Partner of ALLISON-JACKSONVILLE LIMITED PARTNERSHIP, a Florida limited partnership, hereby certifies as follows:

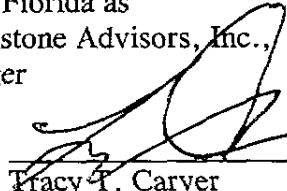
1. The amount of capital contribution to date of the limited partners is: \$100.00.
2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$100.00.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

FL HHPII GP, L.C.,
a Florida limited liability company
General Partner

By: Hearthstone, Inc.,
a California corporation
dba in Florida as
Hearthstone Advisors, Inc.,
Manager

By: 
Tracy T. Carver
Executive Vice President-
General Counsel