

A05000001372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

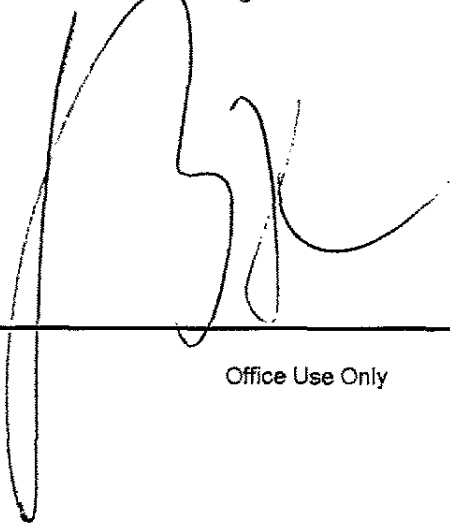
PICK-UP     WAIT     MAIL

(Business Entity Name)

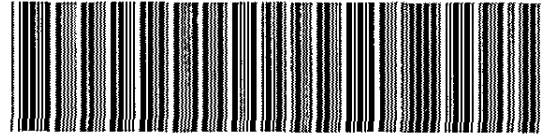
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Charter Number Only

7/13/05 Jorge Herrera

Pointe Developers

Requestor's Name  
1637 NW 27th Ave #200

Address  
Miami, FL 33125

City State ZIP Phone  
(305) 633-4239 A.

VALIDATION ONLY

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CORPORATION(S) NAME

Cypress Pointe, LTD

- Profit
- NonProfit
- Foreign
- Limited Partnership
- Reinstatement
- Certified Copy
- Call When Ready
- Walk In
- Amendment
- Dissolution
- Annual Report
- Reservation
- Photo Copies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other
- Change of Registered Agent
- Certificate Under Seal
- After 4:30
- Mail Out
- Pick Up

Name
Availability
Document
Examiner
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Empire Toll Free: 1-800-432-3028



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

July 14, 2005

EMPIRE

TALLAHASSEE, FL

SUBJECT: CYPRESS POINTE, LTD.  
Ref. Number: W05000033826

L 04 UUUU 94 282

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for CYPRESS POINTE, LTD. and your check(s) totaling \$1785.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$1,785.00 payment.

The limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr  
Document Specialist

Letter Number: 805A00046563

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF LIMITED PARTNERSHIP**

1. Cypress Pointe TAMPA, LTD.  
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 1637 NW 27 Ave #200 Miami FL 33125  
(Business address of Limited Partnership)
3. Jorge Morera  
(Name of Registered Agent for Service of Process)
4. 1637 NW 27 Ave #200 Miami FL 33125  
(Florida street address for Registered Agent)
5. [Signature]  
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 1637 NW 27 Ave #200 Miami FL 33125  
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: \_\_\_\_\_

8. Name(s) of general partner(s): \_\_\_\_\_ Street address: \_\_\_\_\_

<u>Cypress Pointe, LLC.</u>	<u>1637 NW 27 Ave #200 Miami FL 331</u>
<u>L05000068700</u>	_____
_____	_____

*Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.*

Signed this 11 day of July, 2005.

Signature of all general partners:

<u>[Signature]</u> General Partner	_____ General Partner
_____ General Partner	_____ General Partner
_____ General Partner	_____ General Partner

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS  
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of Cypress Pointe  
TAMPA, LTD.

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 2,000

The total amount contributed and anticipated to be contributed by the limited partners at this time  
totals \$ 2,000,000.

Signed this 11 day of JULY, 2005.

FURTHER AFFIANT SAYETH NOT.

*Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the  
contents thereof and that the facts stated herein are true and correct.*

  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner