

A14000000072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

B14-4

(Document Number)

Certified Copies _____ Certificates of Status _____

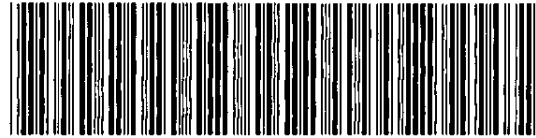
Special Instructions to Filing Officer:

FEB -5 2016

A. LUNT

W14-7152

Office Use Only



100254340351

2014 FEB -9 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2014 FEB -9 PM 9:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 989164 4304045

AUTHORIZATION :

Spuddelem

COST LIMIT : \$ 1052.50

RESUBMIT
Please give original
submission date as file date

ORDER DATE : February 3, 2014
ORDER TIME : 2:42 PM
ORDER NO. : 989164-015
CUSTOMER NO: 4304045

2014 FEB -3 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DOMESTIC FILING

NAME: OASIS AT RENAISSANCE
PRESERVE I, L.P.

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

2014 FEB -4 PM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis - EXT. 2926

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2014

CSC
ATTN: HARRY B. DAVIS

SUBJECT: OASIS AT RENAISSANCE PRESERVE I, L.P.
Ref. Number: W14000007152

2014 FEB -3 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for OASIS AT RENAISSANCE PRESERVE I, L.P. and the authorization to debit your account in the amount of \$1000.00. However, the document has not been filed and is being returned for the following:

The fees to file the Certificate of Conversion and Certificate of Limited Partnership total \$1,052.50. (\$52.50 for the Certificate of Conversion, \$965 filing fee for the Certificate of Limited Partnership, and \$35 for the Registered Agent Designation). Enclose an additional \$52.50 for each certified copy requested and an additional \$5 for each certificate of status requested.

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) 245-6051.

Agnes Lunt
Regulatory Specialist II

Letter Number: 014A00002443

Certificate of Conversion
For
"Other Business Organization"
Into

Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion **and attached Certificate of Limited Partnership** are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104 Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Oasis at Renaissance Preserve I, L.P.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Limited Partnership
(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Georgia

(Enter state, or if a non-U.S. entity, the name of the country)

on 01/03/2014

(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:

Oasis at Renaissance Preserve I, L.P.

(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)

4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.

5. If not effective on the date of filing, enter the effective date: _____
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Limited Partnership, if an effective date is listed therein.)

6. The conversion is permitted by the applicable law(s) governing the other business entity and the other business entity complies with such law(s) in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 FEB -3 PM 9:35

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Signed this 31st day of January, 2014.

Signature of Each General Partner Listed in Attached Certificate of Limited Partnership/Limited Liability Limited Partnership: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature: [Signature]
Printed Name: DARYL C. JONES Title: Vice President of Manager of General Partner

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 FEB - 3 PM 09 05

FILED

Required Signature(s) on behalf of Other Business Entity: Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]

Signature: [Signature]
Printed Name: DARYL C. JONES Title: Vice President of Manager of General Partner

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$ 52.50
Fees for Florida Certificate of Limited Partnership: (\$965 Filing Fee and \$35 Filing Fee)	\$1,000.00
Certified Copy:	\$ 52.50 (Optional)
Certificate of Status:	\$ 8.75 (Optional)

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. Oasis at Renaissance Preserve I, L.P.

(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 L.L.L.P.

2. 191 Peachtree Street, NE, Suite 4100
Street address of initial designated office

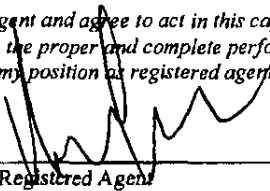
Atlanta, GA 30303

3. Corporation Service Company
Name of Registered Agent for Service of Process

4. 1201 Hays Street
Florida street address for Registered Agent

Tallahassee, FL 32301

5. *I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree 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 my position as registered agent.*



Signature of Registered Agent

Harry B. Davis
Asst. Vice President

6. 191 Peachtree Street, NE, Suite 4100
Mailing address of initial designated office

Atlanta, GA 30303

7. If limited partnership elects to be a limited liability limited partnership, check box .

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TALLAHASSEE FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

Oasis at Renaissance Preserve GP I, LLC

191 Peachtree Street, NE, Suite 4100

Atlanta, GA 30303

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TALLAHASSEE, FLORIDA

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FILED

9. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Signed this 31st day of January, 2014.

Signature of each general partner: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in § 817.185, F.S.

[Signature]
Vice President of Manager of General Partner

