

CT CORPORATION SYSTEM

B01000000297

CORPORATION(S) NAME

ALPFLA Development, LP

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FILED
01 AUG 29 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1715.00

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|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

RECEIVED
01 AUG 29 PM 12:10
DIVISION OF CORPORATION

Name 240
 Availability 7
 Document 1680
 Examiner 35
 Updater 1715
 Verifier 1715
 W.P. Verifier _____

8/29/01

Order#: 4757709

Ref#: _____

Amount: \$ _____

DK
LP-1715

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

JE

APPLICATION BY ALPFLA DEVELOPMENT, LP
FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. The name of the limited partnership is ALPFLA Development, LP.
2. This name is available in the State of Florida for the use of the limited partnership
for the transaction of business.
3. The limited partnership's state of formation is Delaware.
4. The limited partnership's date of formation is August 28, 2001.
5. The name of its registered agent for service of process is CT Corporation System.
6. The street address of its registered office is c/o CT Corporation System, 1200

South Pine Island Road, Plantation, FL 33324.

7. The acceptance by the registered agent for service of process is as follows:

CT Corporation System

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

By: Connie Bryan

8. The address of the principal office of the limited partnership is 3131 Slaton Drive,
No. 32, Atlanta, GA 30305.

9. The name and address of its general partner is as follows:

(a) PANFLA GP, LLC

3131 Slaton Drive, No. 32
Atlanta, GA 30305

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10. The office where the names, addresses and contributions of limited partners are
kept is 3131 Slaton Drive, No. 32, Atlanta, GA 30305.

11. The limited partnership will undertake to keep the records listing the addresses
and capital contributions of the limited partner or limited partners until the limited partnership's
registration in Florida is cancelled or withdrawn.

12. The mailing address of the limited partnership is 3131 Slaton Drive, No. 32, Atlanta, GA 30305.

Under penalties of perjury, I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Dated this 21 day of August, 2001.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ALPFLA DEVELOPMENT, LP

By: **PANFLA GP, LLC, General Partner**

By: Elizabeth Nichols
Elizabeth Nichols, President and Chief Manager

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

On this 21st day of August, 2001, personally appeared before me, a Notary Public in and for said county and state, Elizabeth Nichols, who is personally known to me, and who, upon oath, acknowledged herself to be President and Chief Manger of PANFLA GP, LLC, the sole general partner of ALPLFA Development, LP

Witness my hand and seal this 21st day of August, 2001

Beth W. Carrett
Notary Public's Signature

BETH W. GARRETT
Notary Public's Printed Name

My Commission Expires: May 29, 2005

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

BEFORE ME, the undersigned, personally appeared PANFLA GP, LLC, the general partner of ALPFLA Development, LP, a Delaware limited partnership, hereinafter referred to as the "Partnership," who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 240,000.⁰⁰
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 240,000.⁰⁰

Under the penalties of perjury, I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Dated this 27th day of August, 2001.

ALPFLA DEVELOPMENT, LP

By: PANFLA GP, LLC, General Partner

By: Elizabeth Nichols, President and Chief Manager
Elizabeth Nichols, President and Chief Manager

**STATE OF TENNESSEE)
COUNTY OF DAVIDSON)**

On this 27th day of August, 2001, personally appeared before me, a Notary Public in and for said county and state, Elizabeth Nichols, who is personally known to me, and who, upon oath, acknowledged herself to be President and Chief Manger of PANFLA GP, LLC, the sole general partner of ALPFLA Development, LP

Witness my hand and seal this 27th day of August, 2001

Beth W. Garrett
Notary Public's Signature

BETH W. GARRETT
Notary Public's Printed Name

My Commission Expires: May 29, 2005