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CT CORPORATION SYSTEM		98 MAY 21		
Requestor's Name TALLAHASSEE, FL 32301	PM 4: 31			
Address 22	2-1092			31
City State Zip	Phone	30	0002532	
CORPORATIO	N(S) NAME		-05/22/980 *****87.50	1919UU3 *****87.50
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() Limited Partnership	() Annual F	Report	() Other	
() Reinstatement	() Name. R	egistration	() Change of	R.A.
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W.P. Verifier			12/1/2/	5/21/9/

CR2E031 (1-89)

## Florida Department of State, Jim Smith, Secretary of State

## APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1	THE GABLES (Florida) L.P.
` (N	same of limited partnership as it is in the home state;
2	The Carbies (Plorida)/Edgenrater L.P., LTD.
(Ii	f name is unavailable, name under which the limited partnership propeses to register or ansact business in Florida; must contain the word "LIMITED" or "LTD.")
3.	Delaware 444.
	(State of Formation) (Date of Formation)
_	C T CORPORATION SYSTEM OF OFFI
5	(Name of Registered Agent for Service of Process)  c/o C T Corporation System. 1200 South Pine Island Road  (Street Address of Registered Office)  Plantation  , Florida 33324  (Zin Code)
6.	c/o C T Corporation System, 1200 South Pine Island Road
	(Street Address of Registered Office)
	Plantation , Florida 33324 5
-	(City) (Zip Code)
7.	Acceptance by the Registered Agent for Service of Process.
	Garlara aburkl
	(Officer must sign on this line)  SPECIAL ASSISTANT SECRETARY
	(Type Name and Title of Officer)
8.	1209 ORANGE STREET, WILMINGTON, DELAWARE 19801
	(Address of Registered Office required in State of Formation or, if not required, Address of Principal Office.)
9.	NAME OF GENERAL PARTNERS  SPECIFIC ADDRESS  A50 Bank
·	GABLES DEVELOPMENT LLC  C/O Blackacre Capital Group, 450 Park Avenue, 4th Floor, New York, NY 10022
	~9x000000313
10	). c/o Blackacre Capital Group, 450 Park Avenue, 4th Floor, New York, NY 10022  (Office where Names, Addresses and Contributions of Limited Partners are kept.)
C	1. The limited partnerhsip will undertake to keep the records listing the addresses and apital contributions of the limited partner or limited partners until the limited partnership's egistration in Florida is cancelled or withdrawn.
12	2

This lath day of April , 1998			
	GABLES DEVELOPMENT LLC, as Sole  General Partner		
	By: Blackacre Capital Group L.P.		
	By: Blackacre Capital Management Cor		
	A / - 4		
	By: Jest Eggs		
STATE OF New York	Name: Stephen P. Engdist Title: Authorized Person		
COUNTY OF New York			
	21 - 21		
THE FOREGOING instrument was acknowledged and	i sworn to before me this day		
of Opin , 19 98, by Stephen P. Enquist for CARLES	DEVELOPMENT (NAVime of General Partner) of		
THE GABLES (Florida) L.P.			
(Name of Limited Parntership), A New York	(State or Country) Limited		
Partnerhsip, on behalf of the Limited Partnership.			
Our was a first			
Lillian Christini Sim			
Notary Public	SECRETARY VISION OF C		
State of New York at Large			
(SEAL) My Commission Ex	.piles.		
LILLIAN CHRISTINE LYNCH  NOTARY PUBLIC, State of New York  No. 31-4668604  Qualified in New York County  Commission Expires Q 3 2 4 2 3			
N. C.	o. 31-4668604 F. 25		
	d in New York County Sion Expires 9/30/08		
	- OF		

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned	personally appeared GABLES DEVELOPMENT LLC, a		
general partner of THE GABLES L	a (an)  partnership, hereinafter referred to as the "Partnership", who		
Delaware , limited ;	Dartnership, Hereinatter referred to da tho		
certifies as follows:			
1. The amount of capital cont	ributions of the limited partners is \$ 0.00		
2. The anticipated amount of cated for the purposes of trans	the capital contributions of the limited partners that are allows sacting business in Florida is \$0.00		
This 14th day of April	11, 19 98.		
FURTHER AFFIANT SAYE	TH NOT.		
Under penalties of perjury I of true, to the best of my knowle	declare that I have read the foregoing and that the facts are edge and belief.		
	GABLES DEVELOPMENT LLC, as Sole General Partner		
	By: Blackacre Capital Group L.P. By: Blackacre Capital Management Corp.		
,	By: Stept Eggs		
	Name: Stephen P. Enquist Title: Authorized Person		
and an array of the state of th			
STATE OF New York COUNTY OF New York			
DATE			
to take acknowledgments in peared Stephen P. Enquist for GM me to be the person who exacknowledged to me and be partnership.	ed officer, a Notary Public authorized to administer oaths and and for the State and County set forth above, personally aptroperates DEVELOPMENT LLC (General Partner, known to me and known by ecuted the foregoing Affidavit of Capital Contributions, and he fore me that he executed this Affidavit as General Partner of said		
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this			
State and County aforesaid,	this uay or		
19 98	Single of the Contraction of the		
	Seleve Chuster Algo		
	Notary Public		
Seal	State of New York at Large		
	My Commission Expires:  LILLIAN CHRISTINE LYNCH NOTARY PUBLIC, State of New York No. 31-4668604		
	Qualified in New York County Commission Expires 9/35/97		