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(((H12000235894 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

; (305)634-3694

Fax Number

: (305)633-9696

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

	•	 	 _		

FLORIDA/FOREIGN LP/LLLP CHIEFTAIN PEMBROKE, LP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$1,000.00

D. BRUCE

SEP 27 2012

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP CHIEFTAIN PEMBROKE, LIPO TRANSACT BUSINESS IN FLORIDA

CHIEF TAIN PEMBROKE, LETTRANSA	ICT BUSINESS IN FLURUDA				
(Name of Limited Partnership or Limited Link Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixes:	odity Limited Partnership, which must include suffix) ship, Limited, L.P., LP, or Ltd. Limited Liability Limited Partnership, L.L.L.P. or LLLP.				
If name unavailable, name under which the limited partners business in Flori	ership or limited Hability limited parmership proposes to register to transact da; must contain acceptable suffix.				
State or Country of Formadon PLIE	Dute of Formation				
4. Federal Employer Identification Number:					
5. Name of Registered Agent for Service of Process and THOMAS G. SHERMAN, P.A.	Florida Street Address:				
90 ALMERIA AVE	SEC ALL				
CORAL GABLES, FL 33134	CRETA CAHAA				
iny position as registered agent.	d agree to act in this populity. I further agree to comply with the provisions of remainee of my duties and I am familiar with and accept the obligations of				
•	الله الله الله الله الله الله الله الله				
7. Principal Office:	B. Mailing Address:				
300 SW 1ST AVE.,	300 SW 1ST AVE.,				
SUITE # 133	SUITE # 133				
FORT LAUDERDALE, FL 33301	FORT LAUDERDALE, FL 33301				
9. If limited partnership is a limited liability limited pa	etnership, check box.				
10. Name, principal office address, and mailing address	ss of each general partner;				
Name of General PartneMW PEMBROKE.	LLC Name of General Partner:				
Street Address: 300 SW 1ST AVE. SUITE #	133 Street Address:				
FORT LAUDERDALE, EL 3	3301 M/200005351				
Mailing AddresSAME AS ABOVE	Mailing Address:				
Name of General Partner:	Name of General Partner:				
Street Address:	Street Address:				
	.				

Name of General Partner:		1 of 2 Name of General	Partner:
Street Address:		Street Address:	
Mailing Address:		Mailing Address:	
12. Attached is a certificate of exister	nce duly authenticated, not more	s than 90 days price al having custody	ifiled by the Florida Department of State.) In to the delivery of this application to the of the entity's records in the jurisdiction under
	Signature of a	general vartner	

The individual signing this document affirm that the facts stated herein are true and the individual is aware that faise information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Filing Rees: Certified Copy (optional): Certificate of Status (optional):

\$52.50

\$8.75

Page 2 of 2

09/26/2012 14:27 9696889908

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Delaware

PAGE :

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHIEFTAIN PEMBROKE, LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF SEPTEMBER, A.D. 2012.

5215369 8300.

121045053

You may varify this cortificate online at corp. delaware. gov/authver. shtml

AUTHENTICATION: 9857817

9. ...

DATE: 09-19-12