A01000000249

Requestor's Name

Address

City/State/Zip Phone #

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Renaissance at Washington Ridge, Ltd
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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****445.00 ****148.75

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NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☒ Foreign
- ☒ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

LP - 87.50
CERT - 61.25

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01 FEB 19 AM 10:47
DIVISION OF CORPORATIONS

Examiner's Initials

CR2E031(7/95)

2/19

CERTIFICATE OF LIMITED PARTNERSHIP

RENAISSANCE AT WASHINGTON RIDGE, LTD.

Pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986) and Section 620.108 of the Florida Statutes, the undersigned, being the sole general partner of **RENAISSANCE AT WASHINGTON RIDGE, LTD.**, duly executes and files with the Florida Secretary of State this Certificate of Limited Partnership.

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1. **Name.** The name of the limited partnership is **RENAISSANCE AT WASHINGTON RIDGE, LTD.**

2. **Address.** The business address and the mailing address of the limited partnership is 1012 N Street, N.W., Washington D.C., 20001.

3. **Registered Agent.** The name of the registered agent for service of process is Gary J. Cohen, Esq.

4. **Address; Registered Agent.** The street address for the registered agent is 1500 Miami Center, 201 South Biscayne Boulevard, Miami, Florida 33131.

5. **Records Office.** The records office of the limited partnership is 1500 Miami Center, 201 South Biscayne Boulevard, Miami, Florida 33131.

6. **Term.** The latest date upon which the limited partnership is to be dissolved is December 31, 2050.

7. **Name and Address of General Partner.** The name of the general partner is **TCG WASHINGTON RIDGE, LLC** and the address is 1012 N Street, N.W., Washington D.C., 20001.

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

Signed this 8th day of February, 2001.

TCG WASHINGTON RIDGE, LLC
General Partner

By: _____
Jaime Bordenave, Manager

ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP, THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF HIS DUTIES.

DATED THIS 15 DAY OF FEBRUARY, 2001

_____
Gary J. Cohen
Registered Agent

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

RENAISSANCE AT WASHINGTON RIDGE, LTD.

The undersigned, constituting the sole general partner of **RENAISSANCE AT WASHINGTON RIDGE, LTD.**, a Florida limited partnership, certifies as follows:

1. The initial Limited Partners of **RENAISSANCE AT WASHINGTON RIDGE, LTD.** have contributed $1,000 to the Partnership as their initial capital contribution.

2. The initial Limited Partners anticipate making no additional capital contributions other than the contributions stated above.

Signed this 8th day of February, 2001

FURTHER AFFIANT SAYETH NAUGHT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true to the best of my knowledge and belief.

TCG WASHINGTON RIDGE, LLC
General Partner

By: _____
Jaime Bordenave, Manager