# 1-02000001283

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phone	<del>;</del> #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	•
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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T. CLINE APR 2 1 2008 **EXAMINER** 



### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 9, 2008

BRADLEY ASSOCIATES 225 N. MICHIGAN AVE, 11TH FL ATTN: CARRIE HILTON CHICAGO, IL 60601

SUBJECT: FORT LAUDERDALE CY II, LTD.

Ref. Number: A02000001283

We have received your document for FORT LAUDERDALE CY II, LTD. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

The name of the partnership on our records is FORT LAUDERDALE CY II, LTD.on the merger form this is the name that should appear on the paperwork.

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 (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 708A00020965



# Memo

To: Florida Dept of State

From: Carrie Hilton (312) 819-6982

**Date:** 3/31/2008

Re: Certificate of Merger Filing –Fort Lauderdale Courtyard II, Ltd 2016 2

Per the State of Florida, enclosed is a check in the amount of \$105.00 to cover the Merger fees recording with the State of Florida.

I've enclosed a copy of our document submitted to Delaware to record the Merger Certificates and a copy of our Articles for Mergers.

Please return any and all documents to:

Bradley Associates 225 N. Michigan Ave, 11<sup>th</sup> FI Chicago, IL 60601 Attn: Carrie Hilton

If you have any questions concerning this matter please feel free to contact me at (312)819-69

Thanks Much,

APR 18 PM 2: 2

## Certificate of Merger For Florida Partnership

The following Certificate of Merger is sub Statutes.	bmitted in accordance w	ith s. 620.8918, Florida	
FIRST: The exact name, form/entity type follows:	e, and jurisdiction for ea	ch merging party are as	
Name AUD 1743 Fort Lauderdale CY II, Ltd	Jurisdiction	Form/Entity Type	
Fort Lauderdale CY II, Ltd	Florida	LP	
Ft Lauderdale Courtyard II Ld, LP	Delaware	LP	
SECOND: The exact name, form/entity tas follows:	type, and jurisdiction of	the <u>surviving</u> party are	
Name	Jurisdiction	Form/Entity Type	
Ft Lauderdale Courtyard II 44,LP	Delaware	_ LP	
THIRD: The date the merger is effective under the governing laws of the surviving party is:  (NOTE: If survivor is a Florida partnership, effective date cannot be prior to nor merce than 90 days after the date this document is filed by the Florida Department of State.  Survivor is not a Florida partnership, effective date shall be as provided in the governing law of the surviving party.)			

**FOURTH:** The merger was approved by each party as required by its governing law.

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**<u>FIFTH:</u>** If the surviving party is a foreign organization not qualified to transact business in this state, the street address and mailing address of an office which the Florida Department of State may use for the purposes of s. 620.8919(2), F.S., are as follows:

Street address:	REG Agent: Corporation Service Company
	2711 Centerville Rd Ste 400
	Wilmington, DE 19808
Mailing address:	Same as Above

**SIXTH:** Other provisions, if any, relating to the merger:

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# **SEVENTH:** Signature(s) for Each Party:

(Merger must be signed by all general partners of each partnership and by the authorized representative of each other party.)

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
KGN/Bradley Associates Maridalle	Sterio For	Sherwin Jarol,
Courtyard General Portner, LLC	Del	Robert Finvarb,
	77	

Fees: Filing Fees:

Filing Fees: \$25.00 Per Party
Certified Copy: \$52.50 (Optional)
Certificate of Status: \$8.75 (Optional)

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# **SEVENTH:** Signature(s) for Each Party:

(Merger must be signed by all general partners of each partnership and by the authorized representative of each other party.)

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
KGN/Bradley Associates Abrida, UC	Therin For	Sherwin Jarol,
Courtyard General Portner, LLC		Robert Finvarb,
	·	

Fees: Filing Fees:

\$25.00 Per Party

Certified Copy:

\$52.50 (Optional)

Certificate of Status: \$8.75 (Optional)