

AO 3000000813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

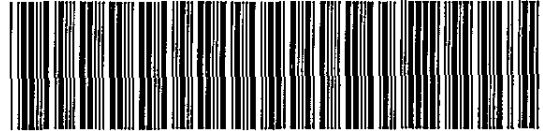
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06/23/03--01013--023 \*\*1750.00

RECEIVED  
03 JUN 23 PM 12:15  
DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

BK

FILED  
03 JUN 23 PM 2:55  
TALLAHASSEE, FLORIDA

CORP DIRECT AGENTS, INC. (formerly CCRS)  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE, FL 32301  
222-1173

**FILING COVER SHEET**  
**ACCT. #FCA-14**

**CONTACT:** ED

**DATE:** 06-23-03

**REF. #:** 0150.17162

**CORP. NAME:** TRG&S LAS OLAS BEACH CLUB, LTD. A03000000813

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JUN 23 PM 2:55  
TALLAHASSEE, FLORIDA

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION                      | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT                                  | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME         |
| <input type="checkbox"/> FOREIGN QUALIFICATION                          | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT                                  | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION                    |   |  |
| <input checked="" type="checkbox"/> OTHER: <u>SUPPLEMENTAL AFFIDVIT</u> |   |  |

**STATE FEES PREPAID WITH CHECK# 10987\$ 1750.00**

**AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

**COST LIMIT: \$** \_\_\_\_\_

**PLEASE RETURN:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY        | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS |   |  |

Examiner's Initials

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS  
FOR A FLORIDA LIMITED PARTNERSHIP

STATE OF FLORIDA                     )  
  ) SS:  
COUNTY OF MIAMI-DADE         )

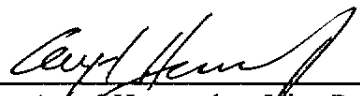
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JUN 23 PM 2:58  
TALLAHASSEE, FLORIDA

The undersigned general partners of TRG&S LAS OLAS BEACH CLUB, LTD., a Florida Limited Partnership, execute this supplemental affidavit filed pursuant to Section 620.112, Florida Statutes.


The total amount of the capital contributions of the limited partners is \$5,100,000.00. No additional contributions by the limited partners are anticipated.

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

TRG - LAS OLAS BEACH CLUB, INC., a  
Florida corporation, a General Partner

By:   
Angel Hernandez, Vice President

SLBH, LLC, a Delaware limited liability  
company, a General Partner

  
By: \_\_\_\_\_  
Name: Fadel Strine  
Title: Managing Member

The foregoing instrument was acknowledged before me this 2nd day of June, 2003, by Angel Hernandez as Vice President of TRG - Las Olas Beach Club, Inc., a Florida corporation, as a General Partner of TRG&S Las Olas Beach Club, Ltd., a Florida limited partnership, who is personally known to me or who has produced a drivers license as identification and who did (did not) take an oath.



Beth A. Getman  
My Commission CC869200  
Expires September 8, 2003

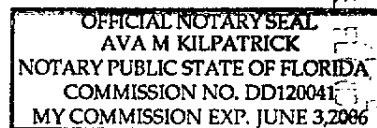
Beth A. Getman  
Print or Stamp Name: Beth A. Getman  
Notary Public, State of Florida at large  
Commission No.: CC869200  
My Commission Expires: 9/6/03

The foregoing instrument was acknowledged before me this 30 day of May, 2003, by Todd Strine as a Managing Member of SLBH, LLC, a Delaware limited liability company as a General Partner of TRG&S Las Olas Beach Club, Ltd., a Florida limited partnership, who is personally known to me or who has produced a drivers license as identification and who did (did not) take an oath.

Ava M. Kilpatrick

Print or Stamp Name:  
Notary Public, State of Florida at large  
Commission No.:  
My Commission Expires:

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