# A0400000061

(Requestor's Name)
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SECRETARY OF STATE.

A04-61

### FLOSSIE RILEY LIMITED PARTNERSHIP

### CERTIFICATE OF LIMITED PARTNERSHIP

This is to certify that the undersigned do hereby form a limited partnership (the "Partnership") pursuant to the Florida Revised Uniform Limited Partnership Act (Sections 620.101, et seq., Florida Statutes, hereinafter referred to as the "Act") this 22<sup>nd</sup> day of December, 2003, and hereby certify to the Florida Department of State as follows:

FIRST: The name of the Partnership is:

### FLOSSIE RILEY LIMITED PARTNERSHIP

SECOND: The purpose for which the Partnership is formed is to engage in and perform any activities or functions which may lawfully be performed by a limited partnership organized under the Act.

**THIRD:** The business address of the Partnership in the State of Florida is 1604 Sea Dunes, Amelia Island, Florida 32034.

FOURTH: The mailing address of the Partnership is % Cornerstone Housing, L.L.C., Attn: Steven Rothfield, 5950 Symphony Woods Drive, Suite 301, Columbia, Maryland 21044.

FIFTH: The name of the resident agent of the Partnership in Florida is Kirk L. Gray, whose street address is 1604 Sea Dunes, Amelia Island, Florida 32034. The resident agent is a Florida resident.

SIXTH: The latest date upon which the Partnership is to be dissolved is December 22, 2100.

SEVENTH: The name and business address of the general partner of the Partnership is CSH Fort Myers, LLC, 1604 Sea Dunes, Amelia Island, Florida 32034

EIGHTH: The name and business address of the special limited partner of the Partnership is The Housing Authority of The City of Fort Myers, 4224 Michigan Avenue, Fort Myers, Florida 33916

IN WITNESS WHEREOF, the undersign acknowledge that this Certificate is their act, and further acknowledge, under penalties for perjury, to the best of their knowledge, information and belief, and that the matters and facts set forth herein are true in all material respects, and that they have executed this Certificate as of the 22<sup>nd</sup> day of December, 2003.

### **GENERAL PARTNER:**

# CSH FORT MYERS, LLC

By: CORNERSTONE HOUSING, L.L.C., its Managing Member

Name: Kirk L. Gray

Title: Chairman and CEO

### SPECIAL LIMITED PARTNER:

THE HOUSING AUTHORITY OF THE CITY OF FORT MYERS

Name: Marcus Goodmanson

Title: Executive Director

### Resident Agent Statement

Having been named as registered agent and to accept service of process for Flossie Riley Limited Partnership at the place designated in this certificate, I herebytaccept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to proper and complete service of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Kirk L. Gray

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(SEAL)

### FLOSSIE RILEY LIMITED PARTNERSHIP

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned, constituting all of the general partners of Flossie Riley Limited Partnership, hereby certify to the Florida Department of State as follows:

- 1. The amount of capital contributions to date of the limited partners is \$10.00.
- 2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$10.00.

## FURTHER AFFIANT SAYETH NOT.

IN WITNESS WHEREOF, the undersign acknowledges that this Affidavit is his act, and further acknowledge, under penalties for perjury, to the best of his knowledge, information and belief, and that the matters and facts set forth herein are true in all material respects, and that he has executed this Affidavit as of the 22<sup>nd</sup> day of December, 2003.

### GENERAL PARTNER:

### CSH FORT MYERS, LLC

By: CORNERSTONE HOUSING, L.L.C., its Managing Member

Name: Kirk L. Gray

Title: Chairman and CEO

Acknowledged as to accuracy.

THE HOUSING AUTHORITY OF THE CITY OF FORT MYERS

Name: Marcus Goodman son

Title: Executive Director