

Division of Corporations

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Florida Department of State
 Division of Corporations
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FLORIDA LIMITED PARTNERSHIP

Lady Lake Pointe Residential Development Group, Ltd.

Certificate of Status	0
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Corporate Filing

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11/10/2005

ACKNOWLEDGEMENT OF REGISTERED AGENT

Having been designated as the Registered Agent for LADY LAKE POINTE RESIDENTIAL DEVELOPMENT GROUP, LTD., the undersigned hereby accepts the designation and agrees to act as the Registered Agent of said limited partnership and states that it is familiar with and accepts its statutory obligations as such, including those obligations contained in §620.192, Florida Statutes.

**B&C CORPORATE SERVICES OF CENTRAL
FLORIDA, INC.,** a Florida corporation

By: _____



**Robyn L. Noren,
Vice President**

Dated this 9 day of November, 2005.

2005 NOV 10 A 10 14
TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned being the sole general partner of LADY LAKE POINTE RESIDENTIAL DEVELOPMENT GROUP, LTD. and being duly sworn do hereby set forth the following for the purpose of accompanying the filing of the Certificate of Limited Partnership of LADY LAKE POINTE RESIDENTIAL DEVELOPMENT GROUP, LTD., with the Florida Department of State, as required by Section 620.108, Florida Statutes:

The amount of the capital contributions of the limited partners as of the date hereof is \$50.00 and no further capital contributions from the limited partners are anticipated at this time.

This Affidavit is executed and sworn to by:

GENERAL PARTNER:

**LADY LAKE POINTE RESIDENTIAL
DEVELOPMENT MANAGERS, L.L.C.,** a Florida
limited liability company

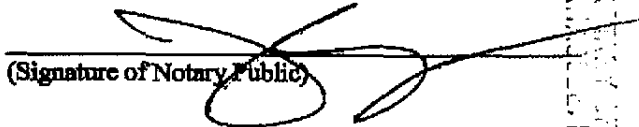
By: 

Paul M. Missigman, Manager

Dated this 9th day of November, 2005.

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 9th day of November, 2005, by Paul M. Missigman as Manager of Lady Lake Pointe Residential Development Managers, L.L.C., a Florida limited liability company, as the general partner of Lady Lake Pointe Residential Development Group, Ltd., a Florida limited partnership. He is personally known to me or has produced _____ as identification and who did/did not take an oath.


(Signature of Notary Public)

(Typed name of Notary Public)

Notary Public, State of Florida

Commission No. _____

My commission expires: TINA SMITH

Notary Public, State of Florida
My comm. exp. Feb. 25, 2006
Comm. No. DD 095158