Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195 Phone

: (850)521-1000

Fax Number

: (850)558-1575

FLORIDA/FOREIGN LP/LLP

CSC Mayfair Owner Limited Partnership, LLLP

Certificate of Status	0
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APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA

1. CSC Mayfair Owner Limited Partnership, LLLP

(Name of Limited Perinership of Limited Liability Limited Perinership, which must include tights) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.			
(If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.)			
2 Delaware 3,11/17/06			
(State or Country of Formation) (Date of Formation)			
4 Corporation Service Company			
(Name of Registered Agent for Service of Process)			
5. 1201 Hays Street			
(Florida street address for Registered Agent)			
Tallahassee, FL 32301			
6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my diales, and I am familiar with an accept the obligations of my position as registered agent Carina L. Duniap Asst. Vice President	•		٠,
Signature of Registered Agent	•		
7. 250 S. Australian Avenue, Sulte 1003	7	_	
(Principal office address)	£SE	90	
West Palm Beach, FL 33401	₽₩	DEC	i i
8. If limited partnership is a limited liability limited partnership, check box	HASSE	-7	
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9. 250 S. Australian Avenue, !	Suite 1003
West Palm Beach, FL 33401	
10. Name, principal office address, and me	iling address of each general partner:
CSC MAYFAIR GP, LLC	250 S. Australian Avenue, Suite 1003
(Name)	West Palm Beach, FL 33401
	MINOLOTAT
	(Mailing Address)
(Nange)	(Street Address)
	(Mailing Address)
· · · · · · · · · · · · · · · · · · ·	
(Name)	(Street Address)
•	
	(Mailing Address)
(Name)	(Street Address)
•	
	(Mailing Address)

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(Name)	(Street Address)
(yanie)	Parent Armen)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Addrain)
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al by the Florida Department of the Attached is a certificate of existe delivery of this application to or other official having custo of which it is organized.	f State.) stence duly authenticated, not more than 90 days prio to the Florida Department of State, by the Secretary o
ed by the Florida Department of Attached is a certificate of exi- the delivery of this application are or other official having custo wor which it is organized.	stence duly authenticated, not more than 90 days prio to the Florida Department of State, by the Secretary o day of the entity's records in the jurisdiction under the

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Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CSC MAYFAIR OWNER LIMITED PARTNERSHIP, LLLP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF DECEMBER, A.D. 2005.

AND I DO HERBEY FURTHER CERTIFY THAT THE SAID "CSC MAYFAIR OWNER LIMITED PARTNERSHIP, LLLP" WAS FORMED ON THE SEVENTEENTH DAY OF NOVEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4254097 8300 061114697 Warnet Smith Handson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 5252686

DATE: 12-06-06