

03/14/2007 14:37 FAX 407 4231831

DEAN MEAD ORLANDO

Division of Corporations

A07000000449

Florida Department of State

Division of Corporations

Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0383

From: **CARL MATTHEWS**

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702

Phone : (407) 841-1200

Fax Number : (407) 423-1831

NOTE: GENERAL PARTNER FILED UNDER FAX AUDIT - H07000067432 3

FLORIDA/FOREIGN LP/LLP

CBM Maguire Properties, Ltd.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$1,052.50

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**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. CBM Maguire Properties, Ltd.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

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.

2. 15717 Oakland Avenue

(Street address of initial designated office)

Oakland, FL 34760

3. R. James Mitchell

(Name of Registered Agent for Service of Process)

4. 15717 Oakland Avenue

(Florida street address for Registered Agent)

Oakland, FL 34760

5. 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 duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent

6. P.O. Box 488

(Mailing address of initial designated office)

Oakland, FL 34760

7. If limited partnership elects to be a limited liability limited partnership, check box ☐

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8. Name and business address of each general partner:

Name:Business Address:

CBM Maguire Properties Management, LLC

P.O. Box 488

Oakland, FL 34760

9. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Signed this 13th day of March, 2007

Signature of each general partner:

CBM Maguire Properties Management, LLCBy: R. James Mitchell

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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F A X

To: Division of Corporations

Fax number: 18502050383

From: The Law Offices of Kent A. Skrivan

Fax number: 239-597-5623

Business phone:

Home phone:

Date & Time: 3/14/2007 2:43:11 PM

Pages: 6

Re: Rodeo Azteca II, L.L.C.
