

Division of Corporations

Page 1 of

A09000000263

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000092220 3)))



H090000922203ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page as it will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : BERMAN, RENNERT, VOGEL & MANDLER, P.A.
Account Number : 076103002011
Phone : (305) 577-4177
Fax Number : (305) 373-6036

2009 APR 20 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FLORIDA/FOREIGN LP/LLLP

Villa Capri II Associates, Ltd.

Attn: Carolyn Lewis

Please file as of 4/20/2009
Thank you.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$1,052.50

RECEIVED
09 APR 20 09 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

C. LEWIS Help

APR 22 2009

EXAMINER

FILED

2009 APR 20 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT NUMBER: H09000092220 3

CERTIFICATE OF LIMITED PARTNERSHIP

OF

VILLA CAPRI II ASSOCIATES, LTD.

1. Name of the Limited Partnership: Villa Capri II Associates, Ltd.
2. Principal and mailing address of the Limited Partnership: 2121 Ponce de Leon Boulevard, PH, Coral Gables, Florida 33134.
3. Name and address of the Registered Agent for Services of Process: Registered Agents of Florida, LLC, 100 Southeast Second Street, Suite 2900, Miami, Florida 33131.
4. Having been named as registered agent to accept service of process for the above stated limited partnership at the place designated in this application, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

REGISTERED AGENTS OF FLORIDA, LLC

By: Charles J. Rennett
Charles J. Rennett, Vice President

5. The latest date upon which the Limited Partnership is to be dissolved is: December 31, 2059.
6. Name and Address of the General Partner: Cornerstone Villa Capri II, LLC, 2121 Ponce de Leon Boulevard, PH, Coral Gables, Florida 33134. L 09600037280

Under penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 17 day of April 2009.

CORNERSTONE VILLA CAPRI II, L.L.C., a
Florida limited liability company, its sole general
partner

By: MSM, INC., a Florida corporation, its member

By: Mara S. Mades
Name: Mara S. Mades
Title: President

FAX AUDIT NUMBER: H09000092220 3