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EXAMINER

PILE D SECRETARY OF STATE ALL ANASSEF FLORID

#### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Terracap	BR,	LP	
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	RA Resignation	
	Dissolution / Withdrawal	
	Annual Report / Reinstatement	
	Cert. Copy	
<u> </u>	Photo Copy	
	Certificate of Good Standing	
	Certificate of Status	
	Certificate of Fictitious Name	
	Corp Record Search	
	Officer Search	
	Fictitious Search	
	Fictitious Owner Search	
	Vehicle Search	
	Driving Record	
	UCC 1 or 3 File	
	UCC 11 Search	
	UCC 11 Retrieval	

# <u>CERTIFICATE OF LIMITED PARTNERSHIP</u> <u>OF</u> <u>TERRACAP BR, LP</u>

ONE PAR. S

The undersigned, as authorized agent of the General Partner of a Limited Partnership formed under the laws of the State of Florida, Florida Statutes, Chapter 620, hereby sets forth and declares:

Article I Name

The name of the Limited Partnership shall be **TERRACAP BR, LP.** 

## Article II Principal Office

The principal place for the transaction of the partnership business shall be 100 Sheppard Avenue East, Suite 502, Toronto, Ontario, Canada, M2N 6N6 and the mailing address shall be 100 Sheppard Avenue East, Suite 502, Toronto, Ontario, Canada, M2N 6N5. That said limited partnership shall have the right and authority to do business at such other place or places within or without the State of Florida as the limited partnership may, by resolution, designate.

Article III Purpose

The partnership may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

#### Article IV Authorized Agent

The name and address of the authorized agent for this limited partnership, who has authority to file this Certificate of Limited Partnership with the Secretary of State of the State of Florida is:

CHARLES MANN 1833 Hendry Street Fort Myers, FL 33901

## Article V Term of Existence

The existence of the partnership shall commence on the filing of this Certificate with the Secretary of State of the State of Florida and shall continue thereafter in perpetuity until dissolved as provided in the partnership agreement or by law.

#### Article VI Registered Office and Agent

The street address of the initial registered office of this corporation is 1833 Hendry Street, Fort Myers, Florida 33901, and the name of the initial registered agent of this corporation at that address is CHARLES MANN, ESQ.

Article VII General Partner

**NAME** 

**ADDRESS** 

Terracap BR Developers, Inc.

100 Sheppard Avenue East, Suite 502 Toronto, Ontario, Canada M2N 6N5

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No Limited Liability Limited Partnership

The Partnership shall be organized as a Limited Partnership. It is **NOT** the intention of the parties to organize a limited liability limited partnership.

IN WITNESS WHEREOF, I, CHARLES MANN, the undersigned being the authorized agent of the Limited Partnership for the purpose of forming a limited partnership under the laws of the State of Florida do make, subscribe, acknowledge and file the foregoing Certificate of Limited Partnership, hereby certifying that the facts therein stated are true, and accordingly set my hand and seal this /o day of August, 2009.

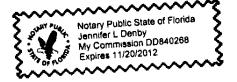
CHARLESMANN

STATE OF FLORIDA ) COUNTY OF LEE )

I HEREBY CERTIFY that before me the undersigned authority, duly authorized to take acknowledgments and administer oaths personally appeared CHARLES MANN, who is known to me to be the person who made and subscribed to the foregoing Articles of Incorporation, and certifies and acknowledges that he made and executed said certificate for the use and purposes therein expressed.

WITNESS my hand and official seal this 10th day of August, 2009.

Nothry Public
My Commission No.: DD 840268
My Commission Expires: 11 20,2012



In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance, with said Act:

First--That **TERRACAP BR, LP**, desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Certificate of Limited Partnership, at **100 Sheppard Avenue East, Toronto, Ontario, Canada, M2N 6N5**, has named **CHARLES MANN, ESQ.**, as its agent to accept service of process within this State.

#### **ACKNOWLEDGMENTS:**

Having been named to accept service of process for the above-stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

By:

CHARLES MANN, Registered Agent