

# A100000000049

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

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Account Name : C T CORPORATION SYSTEM  
Account Number : PCA000000023  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: jskelley@ultimatestudentliving.com

FLORIDA/FOREIGN LP/LLLP  
CS Baltimore Developer, LLLP

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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help

J. BRYAN

JAN 28 2009

EXAMINER

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

1. CS BALTIMORE DEVELOPER, LLP

(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 LLP.

2. 1142 Kelton Avenue  
(Street address of initial designated office)

Ocoee, Florida 34761

3. Jeannie Skelley  
(Name of Registered Agent for Service of Process)

4. 1142 Kelton Avenue  
(Florida street address for Registered Agent)

Ocoee, Florida 34761

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.*

By: Jeannie Skelley  
*Jeannie Skelley*  
Signature of Registered Agent

6. 1142 Kelton Avenue  
(Mailing address of initial designated office)

Ocoee, Florida 34761

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:

Campus Suites, LLC

1090 Don Mills Road, Suite 600

#L05000059738

Toronto, Ontario Canada M3C 3R6

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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 26th day of January, 2010

Signature of each general partner:

Campus Suites, LLC

By: Henry A. Morton, President & CEO

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75