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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : AGI REGISTERED AGENTS, INC.
Account Number : 120000000205
Phone : (305) 416-6800
Fax Number : (305) 416-6811

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dhernandez@agilaw.com

FLORIDA/FOREIGN LP/LLLP
1475 Sam Houston, Ltd.

Certificate of Status	1
Certified Copy	1
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TALLAHASSEE, FLORIDA



February 12, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AGI REGISTERED AGENTS INC

SUBJECT: 1475 SAM HOUSTON, LTD.
REF: W10000007167

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

The effective date must be specific and cannot be prior to the date of filing.

The document must be signed by all of the general partners.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neyssa Culligan
Registered States Specialist II

FAX Aud. #: H10000031316
Letter Number: 010A00003591

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Please note that I had already re-sent the document "accepted" yesterday. However, I made the change to the date

H100000313163

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 FEB 11 AM 8:44

FILED

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

1. 1475 SAM HOUSTON, 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. 1000 Brickell Avenue, Suite 300
(Street address of initial designated office)

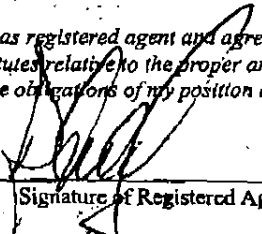
Miami, Florida 33131

3. AGI Registered Agents, Inc.
(Name of Registered Agent for Service of Process)

4. 1000 Brickell Avenue, Suite 300
(Florida street address for Registered Agent)

Miami, Florida 33131

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. 1000 Brickell Avenue, Suite 300
(Mailing address of initial designated office)

Miami, Florida 33131

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:

O.J. Casas, L.L.C.

1395 Brickell Avenue, 14th Floor - FKL

LOI-4991

Miami, Florida 33131

Empty lines for additional partner information.

Empty lines for additional partner business addresses.

9. Effective date, if other than the date of filing: February 11, 2010

(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 11 day of February 2010

Signature of each general partner:

Handwritten signature of O.J. Casas

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TALLAHASSEE, FLORIDA

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75