

**A100000000247**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 : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 876-5368

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

Email Address: \_\_\_\_\_

## FLORIDA/FOREIGN LP/LLLP

## Lantana Cascade MHC Limited Partnership

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$1,000.00

RECEIVED

10 APR 28 AM 10:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 APR 28 AM 9:32

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

T. HAMPTON

APR 29 2010

EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Lantana Cascade MHC Limited Partnership  
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Mark R. Hauser,

Contact Person

Maddin Hauser Wartell Roth & Heller, PC

Firm/Company

28400 Northwestern, Suite 300,

Address

Southfield, MI 48034

City, State and Zip Code

jschoof@rhp-properties.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark R. Hauser,

Name of Contact Person

at ( 248 ) 827-1860

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

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

☐ \$1,008.75 Filing Fees  
and Certificate of  
Status

☐ \$1,052.50 Filing Fees  
and Certified Copy

☒ \$1,061.25 Filing Fees,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

CR2B030 (01/06)

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

1. Lantana Cascade MHC Limited Partnership

*(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. 31200 Northwestern Highway  
*(Street address of initial designated office)*

Farmington Hills, MI 48334

3. C T CORPORATION SYSTEM  
*(Name of Registered Agent for Service of Process)*

4. 1200 SOUTH PINE ISLAND ROAD  
*(Florida street address for Registered Agent)*

PLANTATION, FL 33334

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

Assistant Secretary  
Ashley Pipes

6. 1200 SOUTH PINE ISLAND ROAD  
*(Mailing address of initial designated office)*

PLANTATION, FL 33334

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

10 APR 28 AM 10:32  
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DIVISION OF CORPORATIONS

8. Name and business address of each general partner:

Name:

Business Address:

Lantana Cascade GP, LLC

31200 Northwestern Highway

Farmington Hills, MI 48334

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 27<sup>th</sup> day of April, 2010

Signature of each general partner:

Lantana Cascade GP, LLC

By: 

Lowell D. Salesin, Manager

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