

# A130000000472

Division of Corporations

Page 1 of 1

Florida Department of State  
Division of Corporations  
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.**

(((H13000194084 3)))



H130001940843ABC/

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

To:

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

From:

*LP*  
*Angelica M. Chirn, Corporate Paralegal*  
Account Name : SHUTTS & BOWEN, LLP  
Account Number : 076447000313  
Phone : (305) 358-6300  
Fax Number : (305) 347-7750

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

Email Address:

*gcohen@shutts.com*

FLORIDA/FOREIGN LP/LLLP  
PINNACLE OASIS, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$1,052.50

RECEIVED

13 AUG 30 PM 4:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 AUG 30 PM 9:02

2013 AUG 30 PM 9:02

J. SAULSBERRY  
EXAMINER

SEP 3 2013

Electronic Filing Menu

Corporate Filing Menu

Help

H13000194084 3

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

1. PINNACLE OASIS, 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. 9400 S. DADELAND BOULEVARD, SUITE 100  
(Street address of initial designated office)

MIAMI, FLORIDA 33156

3. CORPORATION COMPANY OF MIAMI  
(Name of Registered Agent for Service of Process)

4. 201 SOUTH BISCAYNE BOULEVARD, SUITE 1600 (GC)  
(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.

CORPORATION COMPANY OF MIAMI

By Raul J. Salas Raul J. Salas, President  
Signature of Registered Agent

6. 9400 S. DADELAND BOULEVARD, SUITE 100  
(Mailing address of initial designated office)

MIAMI, FLORIDA 33156

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

H13000194084 3

H13000194084 3

## 8. Name and business address of each general partner:

Name:

Business Address:

PHG - OASIS, LLC

9400 S. DADELAND BOULEVARD, SUITE 100

MIAMI, FLORIDA 33156

CDC - OASIS, LLC

3628 GRAND AVENUE

COCONUT GROVE, FL 33133

9. Effective date, if other than the date of filing: N/A

(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 28th day of August, 2013

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

PHG - OASIS, LLC

CDC - OASIS, LLC

By:

By:

David O. Deutch, Vice President

Jihad S. Rashid, President of Collaborative Development Corporation, 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

Page 2 of 2

L13000122392

L13000123383

2013 AUG 30 PM 9:02  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

H13000194084.3