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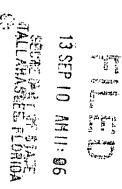
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Creekside Townhomes,	LP
	nership or Limited Liability Limited Partnership
The enclosed Certificate of Limited Partners	hip and fees are submitted for filing.
Please return all correspondence concerning	this matter to:
Bonnie Chafin	
Contact Person	
RHA/Housing, Inc.	
Firm/Company	
3060 Peachtree Road, N.W., Su	ite 900
Atlanta, GA 30305	
City, State and Zip Code	3 SEP
bchafin@rhanet.org	To the second se
E-mail address: (to be used for future annual re	
For further information concerning this matt	er, please call:
Peter Wright	at (404) 968-2678
Name of Contact Person	Area Code and Daytime Telephone Northber 5
Enclosed is a check for the following amoun	it:
\$1,000.00 Filing Fees \$1,008.75 Filing Fees 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:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314

CR2E030 (01/06)

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

1. Creekside Townhomes, LP
(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.P. or LLLP.
2 _. 3060 Peachtree Road, N.W., Suite 900
(Street address of initial designated office)
Atlanta, GA 30305
3. CT Corporation System
(Name of Registered Agent for Service of Process)
4.1200 South Pine Island Road
(Florida street address for Registered Agent)
Plantation, FL 33324
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. Danny Verdecchia, Jr. Asst. Secretary 6. 3060 Peachtree Road, N.W., Suite 900 (Mailing address of initial designated office) Atlanta, GA 30305
, maria, Griosso
7. If limited partnership elects to be a limited liability limited partnership, check box

Page 1 of 2

Name and business address of each Name:	general partner: <u>Business Address:</u>
Creekside Townhomes GP, LLC	3060 Peachtree Road, N.W., S900
	Atlanta, GA 30305
9. Effective date, if other than the date of filing	ng:
(Effective date cannot be prior to nor filed by the Florida Department of Sta	more than 90 days after the date the document is the difference of the days after the date the document is the difference of the days after the date the document is the days after the days af
Signed this 29 day of	august , 2013 5 5
stated herein are true. I/We am/are aw	Te submit this document and affirm that the facts are that any false information submitted in a constitutes a third degree felony as provided for in
By: Ol Clery	gement, Inc., <u>Managing Member</u>
Chase Northcurt, President	
Certified Copy (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

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