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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC  
Account Number : 110432003053  
Phone : (561)694-8107  
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FLORIDA/FOREIGN LP/LLLP  
Lake Delray Housing Partners, LP

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$1,061.25

W16-275

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

1. Lake Delray Housing Partners, 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.L.P.  
or LLLP.

2. 1700 Seventh Avenue, Suite 2000

(Street address of initial designated office)

Seattle, WA 98101

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 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.*

By: 

C T Corporation System

Tim Pratt, Attorney-in-Fact

Signature of Registered Agent

6. 1700 Seventh Avenue, Suite 2000, Seattle, WA 98101

(Mailing address of initial designated office)

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

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

Name:Business Address:Lake Delray Housing Management, LLC1700 Seventh Avenue, Suite 2000Seattle, WA 98101

## 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 4th day of January, 2016

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.

Lake Delray Housing Management, LLCby Vjans Development III, LLC, solo memberby Stephen R. Whyte, President**Filing Fees:****\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)****Certified Copy (optional):****\$52.50****Certificate of Status (optional):****\$8.75**

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