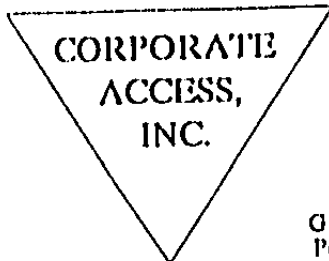


A9500000602



1116-D Thomasville Road
Mount Vernon Square
Tallahassee, Florida 32303
(904) 222-2666
(904) 222-1666 (Fax)
(800) 969-1666

GLINDA P. BENNETT
Personal Representative

OFFICE USE ONLY

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 APR 13 PM 1:18

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Standing Springs Development, Ltd
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #) 200001459372
-04/18/95--01100--011
***1102.50 ***1102.50
4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time

☐ Mail out

☐ Will wait

☐ Photocopy

☒ Certified Copy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

G. TAX _____
FILING 10.15.00
R. AGENT FEE 35.00
C. COPY 52.50
TOTAL 1102.50
V. BANK _____
BALANCE DUE _____
FILING _____

Examiner's Initials

h.h.

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
STANDING SPRINGS DEVELOPMENT, LTD.
A Florida Limited Partnership**

THE UNDERSIGNED, constituting the General Partner of STANDING SPRINGS DEVELOPMENT, LTD., a Florida limited partnership, hereby files its Certificate of Limited Partnership in accordance with Chapter 620, Florida Statutes, as follows:

1. The name of the Partnership is STANDING SPRINGS DEVELOPMENT, LTD.
2. The address of the office of the Partnership is:

901 Ponce de Leon Blvd., Suite 600
Coral Gables, Florida 33134

3. The name and address of the agent for the service of process on the Partnership is:

KTG&S REGISTERED AGENT CORPORATION
1401 Brickell Avenue, Suite 700
Miami, Florida 33131

4. The name and business address of the General Partner is as follows:

STANDING SPRINGS DEVELOPMENT, L.C.
901 Ponce de Leon Blvd., Suite 600
Coral Gables, Florida 33134

5. The mailing address of the Partnership is:

901 Ponce de Leon Blvd., Suite 600
Coral Gables, Florida 33134

6. The latest date upon which the Partnership will dissolve is December 31, 2045.

The execution of this Certificate by the undersigned General Partner constitutes an affirmation under penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Limited Partnership of STANDING SPRINGS DEVELOPMENT, LTD. this 11th day of April, 1995.

**GENERAL PARTNER:
STANDING SPRINGS DEVELOPMENT, L.C.**

By: KTG&S REGISTERED AGENT CORPORATION, its
initial member

By: Marc Chirbael
Its: President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 1:19

L95000000 288

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned authority, personally appeared the undersigned person, as an officer of KTG&S Registered Agent Corporation, the initial member of Standing Springs Development, L.C., the general partner of Standing Springs Development, Ltd., a Florida limited partnership (herein referred to as the "Partnership"), who upon being duly sworn, certified as follows:

1. As of the date hereof, the amount of capital contributions to the Partnership made by the limited partner is as follows:

\$10.00

2. The additional capital contributions anticipated to be contributed by additional limited partners is as follows:

\$144,300

3. Affiant has executed this Affidavit of Capital Contributions as the duly authorized representative of the General Partner of said Partnership.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

GENERAL PARTNER:
STANDING SPRINGS DEVELOPMENT, L.C.

By: KTG&S REGISTERED AGENT CORPORATION, its
initial member

Date: 4/11, 1995

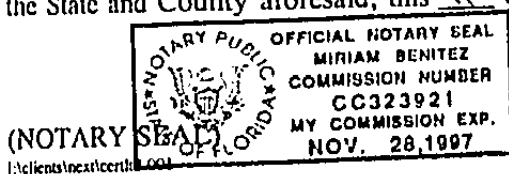
By: Marc H. Auerbach

Its: President

STATE OF FLORIDA)
COUNTY OF DADE)

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgements in and for the State and County set forth above, personally appeared Marc H. Auerbach, an officer of KTG&S Registered Agent Corporation, the initial member of Standing Springs Development, L.C., the general partner of the Partnership (the "General Partner"), known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contribution or who has produced a driver's license with a picture identification, and he acknowledged to me and before me that he executed this Affidavit in foregoing capacity on behalf of the Partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 11 day of April, 1995.



Notary Public

My Commission Expires: _____

FILED
STATE
SECRETARY OF
95 APR 13 PM 1:19

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for STANDING SPRINGS DEVELOPMENT, LTD., a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, the undersigned corporation, on behalf of the Partnership, hereby agrees to accept service of process and to comply with any and all statutes relative to the complete and proper performance of the duties of a registered agent.

REGISTERED AGENT:

KTG&S REGISTERED AGENT CORPORATION

By: Marc H. Chubb
Its: President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 1:18

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Mathews
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 FEB -7 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000602

STANDINGS SPRINGS DEVELOPMENT, LTD.

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, if Applicable

State Apt. # etc.

City State & Zip

2a. New Principal Office Address, if Applicable

State Apt. # etc.

City State & Zip

Mailing Address

901 PONCE DE LEON BLVD., SUITE 000
CORAL GABLES FL 33134

Principal Office Address

901 PONCE DE LEON BLVD., SUITE 000
CORAL GABLES FL 33134

If above addresses are incorrect in any way, file through the correct information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA
04/13/1995

3a. Date of Last Report

4. State or Country of Formation
FL

5a. Capital Contributions as Shown
on Record
\$144,310.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. FEI Number

Applied for

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

SR: Additional Fee required
for a Certificate of Status

8. FEES: 1) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5a or 5b if 5a or 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5a is greater than amount entered in 5b, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

9. Name and Address of Current Registered Agent

KT&S REGISTERED AGENT CORPORATION
1401 BRICKELL AVE., SUITE 700
MIAMI FL 33131

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

State Apt. # etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

STANDING SPRINGS DEVELOPMENT

901 PONCE DE LEON BLV

CORAL GABLES FL 33134

L95000000288

400001713684
-02/13/96--01038--024
****576.25 ****576.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature will have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership reported or trusted empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

Telephone Number

CR2E003 (6/95)

Requestor's Name _____

Address _____

City/State/Zip _____ Phone # _____

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

300002162333--2
 -05/01/97--01036-001
 *****35.00 *****35.00

Handwritten: 5-2-97
 Approved
 P.O.

Examiner's Initials	
---------------------	--



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

May 8, 1997

VERDEJA & GRAVIER
999 PONCE DE LEON BLVD.
SUITE 500
CORAL GABLES, FL 33134

SUBJECT: STANDING SPRINGS DEVELOPMENT, L.C.
Ref. Number: L95000000288

Handwritten note:
All the documents
made on 6/1/97

We have received your document for STANDING SPRINGS DEVELOPMENT, L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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 (904) 487-6916.

Carol Mustain
Corporate Specialist

Letter Number: 497A00024710

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership organized under the laws of the state of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Standing Springs Development Ltd
Name of the limited partnership
2. 4/13/95 3. A. 95000000602
Date of filing/registration in Florida Document number assigned

4. The name and address of the present registered agent and office:

KTG & S Registered Agent Corp
1401 Brickell Ave. #700
Miami FL 33131

5. The name and street address of the successor registered agent and office: (P.O. Box **not** acceptable)

Mike Verdeja
999 Ponce de Leon blvd #501
Coral Gables, FL 33134

Such change was authorized by the general partners.

[Signature]
Signature of General Partner

4/21/97
Date

Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, 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 obligation of my position as registered agent.

[Signature]
Registered Agent signature

4/21/97
Date

Filing Fee: \$35.00

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