

Jolly, Peterson, Waters

Carl Peterson

Requester's Name

2155 Delta Blvd, Suite 110

Address

Tallahassee FL 32303 422-0282

City/State/Zip

Phone #

PRO 37400

TALLAH 32315

Office Use Only

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

1. Whispering Pines Association, LTD.

(Corporation Name)

(Document #)

MAIL TO

2. (Corporation Name) (Document #)

P.O. BOX 37400

TALLAHASSEE, FL 32315

800003120358-3

-02/02/00--01013--022

***1785.00 ***1785.00

3. (Corporation Name) (Document #)

4. LP - 1785

(Corporation Name)

(Document #)

☐ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☒ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 FEB -2 AM 10:35

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DIVISION OF CORPORATIONS
00 FEB -2 AM 10:35

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. Whispering Pines Associates, Ltd.
(Name of limited partnership as it is in the home state)

2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida must contain the word "LIMITED" or "LTD.")

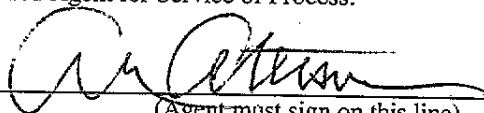
3. Connecticut 4. 10-31-91
(State of Formation) (Date of Formation)

5. Carl R. Peterson, Jr.
(Name of Registered Agent for Service of Process)

6. Jolly, Peterson & Waters, P.A.
2155 Delta Blvd., Suite 110
(Street Address of Registered Office)

Tallahassee, Florida 32303
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:


(Agent must sign on this line)

8. Whispering Pines Associates, c/o 1911 Summer St., Stamford, CT 06905

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

Carl Friedman

1911 Summer Street
Stamford, CT 06905

Ross Rapaport

750 Summer Street
Stamford, CT 06901-1088

10. 1911 Summer Street, Stamford, CT 06905
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

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STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
00 FEB -2 AM 10:35

12. Whispering Pines Associates

c/o 1911 Summer Street, Stamford, CT 06905

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 26th day of January, 2000.

Carl Friedman
Carl Friedman, General Partner

STATE OF CONNECTICUT

COUNTY OF Fairfield

On this 26th day of January, 2000.

Carl Friedman personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

J. Friedman
(Notary Public Signature)

JIM FRIEDMAN
NOTARY PUBLIC
MY COMMISSION EXPIRES DEC. 31, 2003

Seal

My Commission Expires: _____

FILED STATE
SECRETARY OF CORPORATIONS
00 FEB -2 AM 10:35

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Carl Friedman
a general partner of Whispering Pines Associates, Ltd. a (an) Connecticut
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

00 FEB -2 AM 10:35
DIVISION OF CORPORATIONS
STATE OF CONNECTICUT

1. The amount of capital contributions of the limited partners is \$ 481,000.00
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 1,000,000.00

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 26th day of January, 2000.

Carl Friedman
Carl Friedman, General Partner

STATE OF CONNECTICUT

COUNTY OF Fairfield

On this 26th day of January, 2000,

Carl Friedman, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

[Signature]
(Notary Public Signature)

(Notary's Printed Name)

JIM FRIEDMAN
NOTARY PUBLIC
MY COMMISSION EXPIRES DEC 31, 2003

Seal

My Commission Expires: