

CT CORPORATION

B02000000093

CORPORATION(S) NAME

Elliman Realty Co., Ltd.

FILED
02 MAR 22 PM 2:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

400005154084
03/25/02 01048 017
****636.79 *****636.79

- | | | |
|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

RECEIVED
02 MAR 22 AM 11:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Name

3/22/02

Availability

Document

Examiner

Updater

Verifier

W.P. Verifier

LP-636.79

Order#: 5217573

Ref#:

Amount: \$

BK



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

FILED
02 MAR 22 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 22, 2002

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: ELLIMAN REALTY CO.
Ref. Number: W02000008150

We have received your document for ELLIMAN REALTY CO. and check(s) totaling \$636.79. However, your check(s) and document are being returned for the following:

Is this entity a limited partnership???

If so, please add a LIMITED PARTNERSHIP SUFFIX to the name on line 1 for Florida indexing purposes. Please add LTD., LIMITED, or LIMITED PARTNERSHIP.

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 (850) 245-6914.

Buck Kohr
Corporate Specialist

Letter Number: 802A00017350

Thanks
Back!
Bolly M.

RECEIVED
02 MAR 25 AM 11:21
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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TALLAHASSEE, FLORIDA
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1. Elliman Realty Co., 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. Vermont 4. December 31, 1986
(State of Formation) (Date of Formation)

5. CT Corporation System
(Name of Registered Agent for Service of Process)

6. c/o C T Corporation System, 1200 South Pine Island Road
(Street Address of Registered Office)

Plantation, Florida 33324
(City) (Zip Code)

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

CT Corporation System

(Agent must sign on this line)

SALINA AMENTA-CRAW
SPECIAL ASSISTANT SECRETARY

8. P.O. Box 609, Cottage Club Road, Stowe, VT 05672

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

9. NAMES OF GENERAL PARTNERS STREET ADDRESS

D. Trowbridge Elliman P.O. Box 609, Cottage Club Rd., Stowe VT 05672

Claudia W. Elliman P.O. Box 609, Cottage Club Rd., Stowe, VT 05672

10. P.O. Box 609, Cottage Club Road, Stowe, VT 05672
(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

12. P.O. Box 609, Cottage Club Road, Stowe, VT 05672

(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.

This 19th day of March, 2002

General Partner

STATE OF VERMONT

COUNTY OF CHITTENDEN

On this _____ day of March, 2002

D. Trowbridge Elliman personally appeared before me,

who is personally known to me

whose identity I proved on the basis of a U.S. Passport

(Notary Public Signature)

John R. Eggleston
(Notary's Printed Name)

Seal

My Commission Expires: 2-10-03

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STATE
SECRETARY OF
TALLAHASSEE
FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared D. Trowbridge Elliman
a general partner of Elliman Realty Co., a ~~(an)~~ Vermont
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

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TALLAHASSEE, FLORIDA

1. The amount of capital contributions of the limited partners is \$ 373,800.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes transacting business in Florida is \$ 85,974.

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.

This 19 day of March, 2002

[Signature]
General Partner

STATE OF VERMONT

COUNTY OF CHITTENDEN

On this 19th day of March, 2002,

D. Trowbridge Elliman, personally appeared before me,

- who is personally known to me
- whose identity I proved on the basis of a U.S. Passport

[Signature]
(Notary Public Signature)

John P. Eggleston
(Notary's Printed Name)

Seal My Commission Expires:
2-10-03