

BO2060000247

Registered Firm

Address

City/State/Zip

Phone #

Office Use Only

800006331098--3

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): -07/11/02--01041--018

*****95.75 *****95.75

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

BK

02 JUL 11 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

- ☐ 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

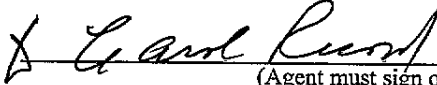
- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

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

Examiner's Initials

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

1. CHAVEZ PROPERTIES-W. BROWARD, L.P.
(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. OHIO 4. 6/25/02
(State of Formation) (Date of Formation)
5. CT CORPORATION SYSTEM
(Name of Registered Agent for Service of Process)
6. 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:

Carol Fiacco
(Agent must sign on this line) Assistant Secretary
8. 250 W. COURT STREET, SUITE 200E, CINCINNATI, OHIO 45202
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
- | | |
|-------------------------------------|--|
| <u>C.P.-200-500 W. BROWARD, LLC</u> | <u>250 W. COURT STREET, SUITE 200E</u> |
| | <u>CINCINNATI, OH 45202</u> |
10. 250 W. COURT STREET, SUITE 200E, CINCINNATI, OH 45202
(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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12. 250 W. COURT STREET, SUITE 200E, CINCINNATI, OHIO 45202

(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 9th day of July, 2002

C.P.-200-500 W. BROWARD, LLC

BY: Manuel Chavez
MANUEL CHAVEZ, MANAGING MEMBER

STATE OF OHIO

COUNTY OF HAMILTON

On this 9th day of July, 2002

Manuel Chavez, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Nancy K. Morris
(Notary Public Signature)

NANCY K. MORRIS
(Notary's Printed Name)

Seal

My Commission Expires: 3/31/04

NANCY K. MORRIS
Notary Public, State of Ohio
My Commission Expires March 31, 2004

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared MANUEL CHAVEZ AS MANAGING MEMBER FOR C.P.-200-500 W. BROWARD, LLC
a general partner of CHAVEZ PROPERTIES-W. BROWARD, L.P., a (an) OHIO

limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

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

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 9th day of July, 2002.

Manuel Chavez
General Partner

STATE OF OHIO

COUNTY OF Hamilton

On this 9th day of July, 2002,

MANUEL CHAVEZ, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Nancy K. Morris
(Notary Public Signature)

NANCY K. MORRIS
(Notary's Printed Name)

NANCY K. MORRIS
Notary Public, State of Ohio
My Commission Expires March 31, 2004

Seal

My Commission Expires: 3/31/04

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