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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name
Availability

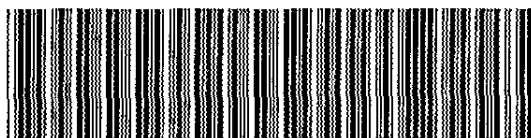
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FILED RECEIVED
03 APR -2 PM 3:00 APR -2 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TC
\$5,916,753.00

CT CORPORATION

April 2, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

Re: Order #: 5819847 SO
Customer Reference 1: 017145.00575
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Pointe at Newport Limited Partnership (DE)
Registration
Florida

Pointe at Newport Limited Partnership (DE)
Cert Copy of Application for Regis-Foreign
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at
(850) 222-1092. Thank you very much for your help.

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

FILED
03 APR -2 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT CORPORATION

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

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

1. Pointe at Newport Limited Partnership
(Name of limited partnership as it is in the home state)
2. N/A
(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. Delaware 4. February 27, 2003
(State of Formation) (Date of Formation)
5. CT Corporation System
(Name of Registered Agent for Service of Process)
6. c/o CT 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:
C T Corporation System
By: [Signature] ANUPHA PUTTY, VP+ASSOC
(Agent must sign on this line)
8. c/o The Corporation Trust Company, Corporation Trust Center,
1209 Orange Street, Wilmington, DE 19801
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
F97 -966
SLC Newport, Inc., 5102 W. Laurel Street, Suite 700, Tampa, Florida 33607
10. 4735 N.W. 7th Court, Boynton Beach, Florida 33426
(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. 4735 N.W. 7th Court, Boynton Beach, Florida 33426

(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 27th day of March, 2003

SLC Newport, Inc.

By: [Signature]

CFO & V.P.

General Partner

STATE OF Florida

COUNTY OF Hillsborough

On this 27th day of March, 2003

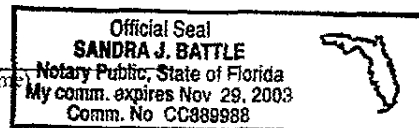
Jon A. DeLuca, personally appeared before me,

☐ who is personally known to me

☒ whose identity I proved on the basis of FL Drivers' License

[Signature]
(Notary Public Signature)

(Notary's Printed Name)



Seal

My Commission Expires: _____

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Jon A. DeLuca, Vice President and Chief Financial Officer of SLC Newport, Inc., a general partner of Pointe at Newport Limited Partnership, a (an) Delaware limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 5,916,753.00
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 5,916,753.00

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 31st day of March, 2003

Pointe at Newport Limited Partnership

By: [Signature]
Jon A. DeLuca
Vice President and Chief Financial Officer

FILED
03 APR - 2 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

On this 31st day of March, 2003, Jon A. DeLuca, Vice President and Chief Financial Officer of SLC Newport, Inc., general partner of Pointe at Newport Limited Partnership, personally appeared before me,

☐ who is personally known to me

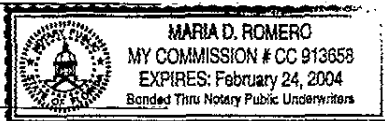
☒ whose identity I proved on the basis of FL. Driver's License # D420-421-62-339-0

[Signature]
(Notary Public Signature)

Maria D. Romero
(Notary's Printed Name)

Seal

My Commission Expires:



Delaware

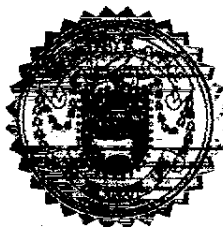
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POINTE AT NEWPORT LIMITED PARTNERSHIP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF MARCH, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POINTE AT NEWPORT LIMITED PARTNERSHIP" WAS FORMED ON THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 2332267

DATE: 03-26-03