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**FOREIGN LIMITED PARTNERSHIP**

**Mallard Cove Venture L.P.**

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

January 29, 2004

CT CORPORATION SYSTEM

SUBJECT: MALLARD COVE VENTURE L.P.  
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FAX Aud. #: H04000020331  
Letter Number: 304A00006116

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

1. Mallard Cove Venture 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. Illinois 4. 12/19/03  
(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:

CT Corporation System

By: Connie Bryan  
(Agent must sign on this line)

CONNIE BRYAN  
SPECIAL ASSISTANT SECRETARY

8. 333 N. Michigan Ave. Suite 501  
Chicago, IL 60601  
(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>Mallard Cove Apartments Corp</u>	<u>333 N. Michigan Ave. Suite 501 Chicago, IL 60601</u>

*FD3-10455*

10. 333 N. Michigan Ave. , Suite 501, Chicago, IL 6061  
(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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.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. 333 N. Michigan Ave., Suite 501, Chicago, IL 60601

(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 27<sup>th</sup> day of January, 2007  
[Signature]  
General Partner

STATE OF Illinois

COUNTY OF DePue

On this 27<sup>th</sup> day of January, 2007

PLATO FOMERAS, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

[Signature]  
(Notary Public Signature)

Constance Kuta-Lopez  
(Notary's Printed Name)



Seal My Commission Expires: 6/28/07

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AND  
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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP**

BEFORE ME the undersigned personally appeared Rafaela Fuentes  
a general partner of Moroccan Love Ventures, LP, a (an) Illinois  
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 1,750,000
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 1,750,000

*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 27th day of January, 2004.

[Signature]  
General Partner

STATE OF Illinois

COUNTY OF Dupage

On this 27th day of January, 2004,

Rafaela Fuentes, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

[Signature]  
(Notary Public Signature)

Constance Kuta-Lopez  
(Notary's Printed Name)



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My Commission Expires: 8/26/07

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