

BU4000000507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

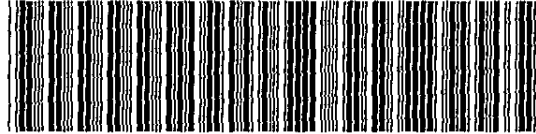
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04 NOV 23 PM 5:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT CORPORATION

November 23, 2004

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

FILED
04 NOV 23 PM 5:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Order #: 6242747 SO
Customer Reference 1:
Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Ginn-LA Battle Two Ltd., LLLP (GA)
Registration
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

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

Sincerely,

Jennifer Murphy
Fulfillment Specialist
Jennifer_Murphy@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

FILED
04 NOV 23 PM 5:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Ginn-LA Battle Two Ltd., LLLP
(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. Georgia 4. 11/1/2004
(State of Formation) (Date of Formation)

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

6. 1200 South Pine Island Rd.,
(Street Address of Registered Office)

Plantation, Florida 33324
(City) (Zip Code)

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

Connie Bryan **CONNIE BRYAN**
SPECIAL ASSISTANT SECRETARY
(Agent must sign on this line)

8. 3343 Peachtree Rd., Ste 1600
Atlanta, GA 30326
(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>Ginn-Battle Two GP, LLC</u>	<u>215 Celebration PI Ste. 200</u>
<u>M040000 04810</u>	<u>Celebration, FL 34747</u>

10. 215 Celebration PI Ste. 200, Celebration, FL 34747
(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. 215 Celebration Place, Ste. 200

Celebration, FL 34747

(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 19th day of November, 2004

Ginn Battle Two GP, LLC

BY: [Signature]
Edward R. Ginn, III, Mgr/General Partner

STATE OF Georgia

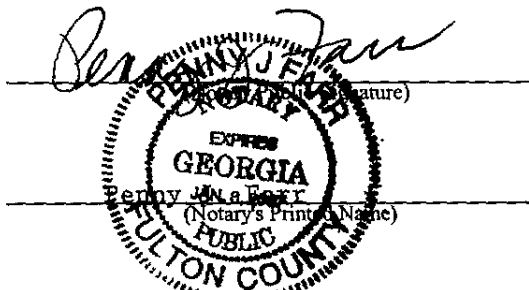
COUNTY OF Fulton

On this 19th day of November, 2004

Edward R. Ginn, III, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____



Seal

My Commission Expires: 1/8/2004

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Edward R. Ginn, III
Manager of the
a general partner of Ginn-LA Battle Two Ltd., LLLP, a (an) Georgia
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 25,000,000.00
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 25,000,000.00

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 19th day of November, 2004.
Ginn Battle Two GP, LLC

BY: [Signature]
Edward R. Ginn, III, Mgr of General Partner

STATE OF Georgia

COUNTY OF Fulton

On this 19th day of November, 2004,

Edward R. Ginn, III, personally appeared before me,

- ☒ who is personally known to me
☐ whose identity I proved on the basis of _____

[Signature]
(Notary Public Signature)
Penny J. Farr
(Notary's Printed Name)
Seal My Commission Expires: 1/8/07