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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 249052 4805432

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : March 9, 2005

ORDER TIME : 11:25 AM

ORDER NO. : 249052-125

CUSTOMER NO: 4805432

CUSTOMER: Mr. Patrick Doohar  
Silverstein And Mullens,  
Suite 800  
1776 K Street, N.w.  
Washington, DC 20006

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05 MAR 15 AM 8:47  
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TALLAHASSEE, FLORIDA

*file record*

FOREIGN FILINGS

NAME: MBEACH1, LLLP

XXXX QUALIFICATION (TYPE: LLL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING \*\* 2 NEEDED \*\*

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: \_\_\_\_\_

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

**FILED**  
05 MAR 15 AM 8:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- LTP.
1. MBEACH1, LLLP (a Delaware limited liability limited partnership)  
(Name of limited partnership as it is in the home state)
  2. MBEACH1, LLLP, LTD.  
(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  
(State of Formation)
  4. November 30, 2004  
(Date of Formation)
  5. Corporation Service Company  
(Name of Registered Agent for Service of Process)
  6. 1201 Hays Street  
(Street Address of Registered Office)
  - Tallahassee, Florida 32301  
(City) (Zip Code)
  7. Acceptance by the Registered Agent for Service of Process:  
Carla Lohi  
Asst. Vice President  
(Agent must sign on this line)
  8. 220 Miracle Mile, Suite 238  
Coral Gables, FL 33134  
(Address of registered office required in state of formation or, if not required, address of principal office.)
  9. NAMES OF GENERAL PARTNERS STREET ADDRESS  
MBEACH1 GP, LLC 220 Miracle Mile, Suite 238, Coral Gables, FL 33134  
M05000001388
  10. 220 Miracle Mile, Suite 238, Coral Gables, FL 33134  
(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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.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. 220 Miracle Mile, Suite 238Coral Gables, FL 33134

(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 14th day of March, 2005

[Signature]  
General Partner

STATE OF FloridaCOUNTY OF Dade

On this 14th day of March, 2005

Robert S. Wernett, personally appeared before me,

☒ who is personally known to me

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

[Signature]  
(Notary Public Signature)

Heather Chisholm  
(Notary's Printed Name)



Heather Chisholm  
Commission # DD333793  
Expires: JUNE 29, 2008  
AARONNOTARY.com

Seal

My Commission Expires: 06/29/08

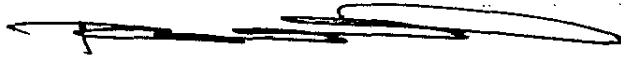
**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP**

BEFORE ME the undersigned personally appeared Robert S. Wennett, authorized representative for  
a general partner of MBEACH1, LLLP, LTD., 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 \$ 5,000,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 5,000,000.

*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 14th day of March, 2005.

  
\_\_\_\_\_  
General Partner

STATE OF Florida

COUNTY OF Dade

On this 14th day of March, 2005.

Robert S. Wennett, personally appeared before me,

☒ who is personally known to me

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

  
\_\_\_\_\_  
(Notary Public Signature)

Heather Chisholm  
\_\_\_\_\_  
(Notary's Printed Name)



Heather Chisholm

Commission # DD333793

Expires: JUNE 29, 2008

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My Commission Expires: 06/29/08