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Florida Department of State  
Division of Corporations  
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## From:

Account Name : CORPORATION SERVICE COMPANY  
Account Number : I20000000195  
Phone : (850) 521-1000  
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**FOREIGN LIMITED PARTNERSHIP****TB ISLE RESORT LP**

Certificate of Status	0
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Susie Knight 2x2256

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J. BRYAN OCT 4 2005

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2005 OCT -5 PM 12:50  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

RECEIVED  
05 OCT -5 PM 3:52  
DIVISION OF CORPORATION

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

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2005 OCT -5 PM 12:50  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

1. TB Isle Resort LP  
(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. Delaware 4. 09/28/2005  
(State of Formation) (Date of Formation)
5. Mario A. Romine  
(Name of Registered Agent for Service of Process)
6. 19501 Biscayne Boulevard, Suite 400  
(Street Address of Registered Office)
- Aventura, Florida 33180  
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:  
Mario A. Romine  
(Agent must sign on this line)
8. 19501 Biscayne Boulevard, Suite 400, Aventura, FL 33180  
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS  
#1705000005454  
TB Isle Resort GP, LLC 19501 Biscayne Boulevard, Suite 400 Aventura, FL 33180
10. 19501 Biscayne Boulevard, Suite 400, Aventura, FL 33180  
(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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.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. 19501 Biscayne Boulevard, Suite 400, Aventura, FL 33180

(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 4th day of October, 2005

General Partner

STATE OF Florida

COUNTY OF Miami-Dade

On this 4th day of October, 2005

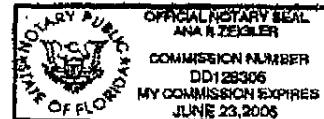
Jeffrey Soffer, personally appeared before me,

☒ who is personally known to me

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

Ana B. Zeigler  
(Notary Public Signature)

Ana B. Zeigler  
(Notary's Printed Name)



Seal

My Commission Expires: 06/23/2006

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

BEFORE ME the undersigned personally appeared Jeffrey Soffer  
a general partner of TB ISLE RESORT GP, LLC, 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 \$ 1000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 1000.

*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 4th day of October, 2005.

  
General Partner

STATE OF Florida

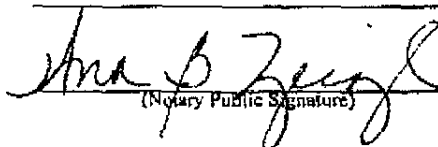
COUNTY OF Miami-Dade

On this 4th day of October, 2005.

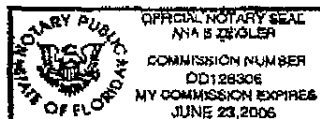
Jeffrey Soffer, personally appeared before me,

☒ who is personally known to me

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

  
(Notary Public Signature)

Ana B. Zeigler  
(Notary's Printed Name)



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My Commission Expires: 06/23/2006

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