

Florida Department of State

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Division of Corporations

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From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1575

FOREIGN LIMITED PARTNERSHIP

C2 LAND, L.P.

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

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1530
400

10_c/o Sarafim Realty Advisors Co., 8115 Preston Rd Ste 400, Dallas, TX 75225 (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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.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

2. c/o Sarafim Realty Advisors Co., 8115 Preston Road, Suite 400, D	nllas, TX 75225	<u></u>
(Mailing Address of Limited Par	nership)	
Inder penaities of perjury I, being duly sworn, declare that I have read not that the facts stated herein are true and correct.	the foregoing and kno	w the contents thereof
igned this 28 day of November	2005	,
Charles 1 - Concernity Partner		
FATE OFTENOS		
OUNTY OF Dallas		
	_	
On this 26 day of November, 2005	2	
Charles R. Lathern p	ersonally appeared before	ore me,
who is personally known to me		
whose identity I proved on the basis of		
SALLY SALEH MY COMMISSION EXPIRES February 13, 2006 (Notary's Printed Name)		2005 DEC -2 SECRETARY C
Seal My Commission Expires: 02/13/0	<u>6</u>	A 4 02

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Charles R. Lathern
a general partner of C2 Land, J.P., a (an) Delaware
limited parmership, hereinafter referred to as the "Partnership", who certifies as follows:
1. The amount of capital contributions of the limited partners is \$ 190,00
2. The anticipated amount of the capital contributions of the limited pertners that are allocated for the purposes of transacting business in Florida is \$ (O O _ + O O)
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 28 day of November , 2005.
Chonden A. Cotton General Partner
COUNTY OF Dallas
on onis 28 day of November , 2005
personally appeared before me.
who is personally known to me
whose identity I proved on the basis of
(Notary Public Signature) SALLY SALER MY COMMISSION EXPIRES
Sally Saleh (Notary's Printed Name)
Seal My Commission Expires: 02\13\010