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CNLRS Rockwall, L.P.

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APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA

1. CNLRS Rockwall, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, *which must include suffix*)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Texas (State or Country of Formation)

3. 02/16/06 (Date of Formation)

4. C T Corporation System
(Name of Registered Agent for Service of Process)

5. 1200 South Pine Island Road, Plantation, Florida 33324
(Florida street address for Registered Agent)

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6. *I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.*
C T Corporation System

By: PETER F. SOUZA
ASSISTANT SECRETARY
Signature of Registered Agent

7. *450 South Orange Avenue, Suite 900*
(Principal office address)

Orlando, Florida 32801

8. If limited partnership is a limited liability limited partnership, check box ☐

9. 450 South Orange Avenue, Suite 900
(Mailing address)

Orlando, Florida 32801

10. Name, principal office address, and mailing address of each general partner:

CNLRS Equity Ventures Rockwall, Inc. (Name)	450 South Orange Avenue, Suite 900 (Street Address) Orlando, Florida 32801
F06-1294	450 South Orange Avenue, Suite 900 (Mailing Address) Orlando, Florida 32801
(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)

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TALLAHASSEE, FLORIDA

(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)

11. Effective date, if other than the date of filing:_____.

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 27th day of February ,20 06 .

Signature of a general partner:

Christopher P. Tessitore, Secretary

Filing Fees:	**$1,000.00** ($965 Filing Fee and $35 Registered Agent Fee)
Certified Copy (optional):	**$52.50**
Certificate of Status (optional):	**$8.75**

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697

Roger Williams
Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for *CNLRS ROCKWALL, L.P.* (*filing number*: 800614472), a Domestic Limited Partnership (LP), was filed in this office on February 16, 2006.

It is further certified that the entity status in Texas is in existence.

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TALLAHASSEE, FLORIDA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 28, 2006.

Roger Williams
Secretary of State

Phone: (512) 463-5555
Prepared by: SOS-WEB

Come visit us on the Internet at http://www.sos.state.tx.us/
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