

BA0000000352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

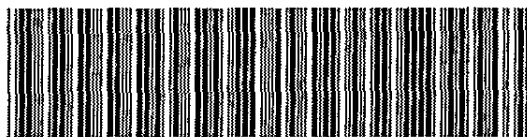
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(9/27)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 SEP 27 AM 10:50

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Valley Apartments, Ltd.

(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

J. Lindsay Builder, Jr., Esq.

(Contact Person)

Graham Builder Jones Pratt & Marks, LLP

(Firm/Company)

P.O. Drawer 1690

(Address)

Winter Park, FL 32790

(City, State and Zip Code)

For further information concerning this matter, please call:

J. Lindsay Builder, Jr., Esq.

(Name of Contact Person)

at ( 407 ) 647-7670

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fees  
( \$965 Filing Fee and  
\$35 Registered Agent  
Fee)

☐ \$1,008.75 Filing Fees  
and Certificate of  
Status

☐ \$1,052.50 Filing Fees  
and Certified Copy

☒ \$1,061.25 Filing Fee,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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

1. Valley Apartments, Ltd.

(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 LLP.

(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. Pennsylvania

(State or Country of Formation)

3. 9-6-1985

(Date of Formation)

4. Harris Cramer LLP

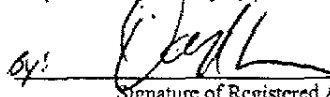
(Name of Registered Agent for Service of Process)

5. 1555 Palm Beach Lakes Blvd., Suite 310

(Florida street address for Registered Agent)

West Palm Beach, FL 33401-4325

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 and accept the obligations of my position as registered agent.

by:   
Signature of Registered Agent David Cramer, Pres. of  
Harris Cramer & Associates, P.A., Partner

7. c/o Harris Cramer, LLP, 1555 Palm Beach Lakes Blvd., Suite 310

(Principal office address)

West Palm Beach, FL 33401-4325

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

9. c/o Harris Cramer, LLP, 1555 Palm Beach Lakes Blvd., Suite 310

(Mailing address)

West Palm Beach, FL 33401

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

Spring Valley General Partner, Inc.

(Name)

*PAV-799411*

1555 Palm Beach Lakes Blvd., Suite 310

(Street Address)

West Palm Beach, FL 33401

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

_____	_____
(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 \_\_\_\_\_ day of September, 20 06.

Signature of a general partner:

SPRING VALLEY GENERAL PARTNER, INC.

By: \_\_\_\_\_

William P. Myers, President

<b>Filing Fees:</b>	<b>\$1,000.00</b> (\$965 Filing Fee and \$35 Registered Agent Fee)
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

**COMMONWEALTH OF PENNSYLVANIA**

**DEPARTMENT OF STATE**

**AUGUST 31, 2006**

**TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:**

**I DO HEREBY CERTIFY THAT,**

**VALLEY APARTMENTS, LTD.**

**is duly registered as a Limited Partnership under the laws of the Commonwealth  
of Pennsylvania and remains subsisting so far as the records of this office show,  
as of the date herein.**



**IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's Office to  
be affixed, the day and year above  
written.**

*Pecho A. Cortis*

**Secretary of the Commonwealth**