

B06000000397

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

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((H060002641173)))



H060002641173ABC.

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To: Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

*please refile
and backdate
to 10/31
Thanks!*

FLORIDA/FOREIGN LP/LLP

EQI Orlando 2 Partnership. L.P.

| | |
|-----------------------|------------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 056 |
| Estimated Charge | \$1,008.75 |

06 OCT 31 AM 10:43

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

7/11/2

Electronic Filing Menu

Corporate Filing Menu

Help



November 1, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: EQ1 ORLANDO 2 PARTNERSHIP, L.P.
REF: W06000047819

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The required electronic filing cover sheet was not submitted with the document. Please resubmit the document with the electronic filing cover sheet.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6853.

Leslie Sellers
Document Specialist

FAX Aud. #:
Letter Number: 806A00054621

RECEIVED

06 NOV - 1 AM 11:50

DIVISION OF CORPORATION

P.O BOX 6327 - Tallahassee, Florida 32314

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

1. EQ1 Orlando 2 Partnership, 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. TN 3. 10-16-06
 (State or Country of Formation) (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)

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.

C T Corporation System
 By: John J. Linnihan
 Signature of Registered Agent

7. 7700 Wolf River Blvd.
 (Principal office address)

germantown, TN 38138

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

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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 06 OCT 31 AM 10:43

9. 7700 Wolf River Blvd.
(Mailing address)

germantown, TN 38138

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

EQ1 FL Corporation
(Name)

7700 Wolf River Blvd
(Street Address)

germantown, TN 38138

same as above
(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

Page 2 of 3

| | |
|-----------------|----------------------------|
| _____ (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 24th day of October 20 06.

Signature of a general partner: EQ1 FL Corporation


HOWARD SILVER
PRESIDENT

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

Page 3 of 3

**Secretary of State
Division of Business Services**

312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 10/26/2006
REQUEST NUMBER: 06289515
TELEPHONE CONTACT: (615) 741-6488
FILE/REGISTRATION DATE: 10/16/2006
STATUS: ACTIVE
CONTROL NUMBER: 0531988
JURISDICTION: TENNESSEE

TO:
CFS
8161 HWY 100
NASHVILLE, TN 37221

REQUESTED BY:
CFS
8161 HWY 100
NASHVILLE, TN 37221

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"EQI ORLANDO 2 PARTNERSHIP, L.P."

IS A LIMITED PARTNERSHIP DULY CREATED UNDER THE LAW OF THIS STATE, WHOSE
CERTIFICATE OF LIMITED PARTNERSHIP WAS FILED WITH THIS OFFICE ON THE DATE GIVEN
ABOVE.
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE LIMITED PARTNERSHIP HAVE BEEN PAID AND THAT A CERTIFICATE OF
CANCELLATION OF LIMITED PARTNERSHIP HAS NOT BEEN FILED.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT 31 AM 10:43

FOR: REQUEST FOR CERTIFICATE

ON DATE: 10/26/06

FROM:
CAPITAL FILING SERVICE (CFS)
8161 HIGHWAY 100
#172
NASHVILLE, TN 37221-0000

RECEIVED: FEES \$340.00 \$0.00
TOTAL PAYMENT RECEIVED: \$340.00

RECEIPT NUMBER: 00004044058
ACCOUNT NUMBER: 00101230



55-4434

Riley C Darnell
RILEY C. DARNELL
SECRETARY OF STATE