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Florida Department of State
Division of Corporations
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To:

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

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Account Name : CORPORATION SERVICE COMPANY
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FLORIDA/FOREIGN LP/LLP

TGC CLERMONT ASSOCIATES LP

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6/21/2007
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APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

1. TGC Clermont Associates LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., L.P., 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. Delaware

(State or Country of Formation)

3. 4/17/2006

(Date of Formation)

4. William A. Shewalter

(Name of Registered Agent for Service of Process)

5. c/o The Goodman Company, 777 South Flagler Drive

(Florida street address for Registered Agent)

West Palm Beach, Florida 33401

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.

William A. Shewalter

By: William A. Shewalter

Signature of Registered Agent

7. c/o The Goodman Company, 777 South Flagler Drive

(Principal office address)

West Palm Beach, Florida 33401

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

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9. c/o The Goodman Company, 777 South Flagler Drive

(Mailing address)

West Palm Beach, Florida 33401

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

TGC CLERMONT ASSOCIATES GP LLC

(Name)

104-39114

777 South Flagler Drive

(Street Address)

West Palm Beach, FL 33401

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

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

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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 19th day of June, 20 2007

Signature of a general partner: _____
By: TGC Clermont GP LLC (General Partner)
By: Goodman Properties, Inc. (its Manager)
By: William A. Shewalter
William A. Shewalter, Vice 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

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TGC CLERMONT ASSOCIATES LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF JUNE, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TGC CLERMONT ASSOCIATES LP" WAS FORMED ON THE SEVENTEENTH DAY OF APRIL, A.D. 2006.

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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5777948

DATE: 06-20-07