

B070000000265

Note: Please print this page and use it as a cover sheet. Type the tax amount number (shown below) on the top and bottom of all pages of the document.

((H07000132560 3)))



H070001325603ASCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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 refill
and backdate
to 5/15/07
thanks!*

FLORIDA/FOREIGN LP/LLP

Rainwood Associates, L.P.

Certificate of Status	0
Certified Copy	0
Page Count	08/67
Estimated Charge	\$1,000.00

RECEIVED

07 MAY 16 AM 10:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DB

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 MAY 15 AM 9:31

FILED

Electronic Filing Menu

Corporate Filing Menu

Help



May 16, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION

SUBJECT: RAINWOOD ASSOCIATES, L.P.
REF: W07000023342FILED
07 MAY 15 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6984.

Deborah Bruce
Document SpecialistFAX Aud. #: H07000132560
Letter Number: 307A00034092

P.O. BOX 6327 - Tallahassee, Florida 32314

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

1. Rainwood Associates, 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 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. Georgia

(State or Country of Formation)

3. 12/5/1989

(Date of Formation)

4. C T Corporation System

(Name of Registered Agent for Service of Process)

5. 1200 South Pine Island Road

(Florida street address for Registered Agent)

Plantation, FL 33324

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:

Carrie Bayne
Signature of Registered Agent

7. 5555 Glenridge Connector, Suite #700

(Principal office address)

Atlanta, Georgia 30342-4758

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

FILED
07 MAY 15 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9. 5555 Glenridge Connector, Suite #700

(Mailing address)

Atlanta, Georgia 30342-4758

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

Rainwood G.P., Inc.

(Name)

5555 Glenridge Connector, #700

(Street Address)

Atlanta, Georgia 30342-4758

5555 Glenridge Connector, #700

(Mailing Address)

Atlanta, Georgia 30342-4758

F070000002563

(Street Address)

(Name)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 MAY 15 AM 9:31

FILED

_____ (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 _____, 20____

Signature of a general partner:

George H. Lane III

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

FILED
 07 MAY 15 AM 9:31
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



CT

a Wolters Kluwer business

CT
1201 Peachtree Street NE
Atlanta, GA 30361

404 828 7795 tel
404 828 7795 fax
www.ctlegalsolutions.com

Signature block for Rainwood Associates, L.P., a Georgia limited partnership

RAINWOOD ASSOCIATES, L.P., a Georgia limited partnership

By: Rainwood G.P., Inc., a Georgia corporation, its General Partner

By: George H. Lane, III, its President

FILED

07 MAY 15 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

104-609931

Control No. J923612

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

FILED
07 MAY 15 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

RAINWOOD ASSOCIATES, L.P.

Domestic Limited Partnership (ULPA)

was formed or was authorized to transact business on 12/05/1989 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 14th day of May, 2007

Karen C Handel
Secretary of State

Certification Number: 1401096-1 Reference: 94/57977
Verify this certificate online at <http://corp.sos.state.ga.us/corp/soskb/verify.asp>