## **Electronic Filing Cover Sheet**

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

(((H07000219342 3)))



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

#### FLORIDA/FOREIGN LP/LLP

#### Royal Tallahassee Partnership II Limited Partnership

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$1,000.00



Electronic Filing Menu

Corporate Filing Menu

Help

# SECRETARY UP OR ATTOMS DIVISION OF CORPORATIONS OF NIG 21 PH 2: 27

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

1. Royal Tallahassee Partnership II Limited Partnership (Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffices: Limited Partnership, Limited, L.P., L.P., or Ltd. Acceptable Limited Liability Limited Partnership suffices: 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 busine	ses in Florida; must contain acceptable suffix.)	
2. Delaware	3, August 16, 2007	
(State or Country of Formation)	(Date of Formation)	
4. CTC	prporation System	
(Name of Registered	Agent for Service of Process)	
5. 1200 South Pine Islan	i Road, Plantation, Florida 33324	
(Florida street add	ross for Registered Agent)	
comply with the provisions of all statutes relative and I am familiar with an accept the obligations of T Co  By:  Signsture of Signstu	agent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent.  Higherty Baggett Assistant Secretary of Registered Agent	
FMHIII, 1948 /0/70		
8. If limited partnership is a limited liabil	ity limited partnership, check box	

Page 1 of 3

	(Mailing address)	
astin, Texas 78746		
10. Name, principal office address, and mailing address of each general partner.		
X OP-Royal Tallahassee II 3, LLC	805 Les Cimas Parkway, Suite 400	
(Name)	(Street Address) Austin, Texas 78746	
mo6-1111	805 Las Cimas Parkway, Suite 400	
De IIII	(Maifing Address) Austin, Texas 78746	
(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)
1. Effective date, if other than the date	of filing:
Effective date cannot be prior to led by the Florida Department of	nor more than 90 days after the date this document is f State.)
the delivery of this application (	stence duly authenticated, not more than 90 days prior to the Florida Department of State, by the Secretary of ody of the entity's records in the jurisdiction under the
gned this day	y of August
gnature of a general partner:	
	·
ling Pees; ertified Copy (optional); ertificate of Status (optional);	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

Page 3 of 3

#### Title of signatory and general partner:

The document to which this is attached was executed on behalf of Royal Tallahassee Partnership II Limited Partnership by:

ACC OP-Royal Tallahassee II 3, LLC, its general partner,

By: American Campus Communities Operating Partnership LP, its managing member,

By: American Campus Communities Holdings LLC, its general partner,

By: American Campus Communities, Inc., its managing member,

By: James C. Hopke, its Executive Vice President

### Delaware

DAGE

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ROYAL TALLAHASSEE PARTNERSHIP II LIMITED PARTNERSHIP" 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 TWENTY-EIGHTH DAY OF AUGUST, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

**44**0893**4** 8300 070966**4**83



Warriet Smith Windson Secretary of State

AUTHENTICATION: 5961117

DATE: 08-28-07