

BU7000000331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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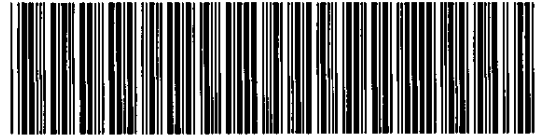
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Champion Gate Operating  
Associates, Ltd*

*File 2<sup>nd</sup>*

Signature

Requested by:

*WC 10/31 11:00*

Name

Date

Time

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TALLAHASSEE, FLORIDA

- \_\_\_ Art of Inc. File
- \_\_\_ LTD Partnership File
- ☒ Foreign ~~Corp.~~ File *Ltd*
- \_\_\_ L.C. File
- \_\_\_ Fictitious Name File
- \_\_\_ Trade/Service Mark
- \_\_\_ Merger File
- \_\_\_ Art. of Amend. File
- \_\_\_ RA Resignation
- \_\_\_ Dissolution / Withdrawal
- ☒ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☒ Photo Copy
- ☒ Certificate of Good Standing
- \_\_\_ Certificate of Status
- \_\_\_ Certificate of Fictitious Name
- \_\_\_ Corp Record Search
- \_\_\_ Officer Search
- \_\_\_ Fictitious Search
- \_\_\_ Fictitious Owner Search
- \_\_\_ Vehicle Search
- \_\_\_ Driving Record
- \_\_\_ UCC 1 or 3 File
- \_\_\_ UCC 11 Search
- \_\_\_ UCC 11 Retrieval

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

FILED  
07 OCT 31 PM 3:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. ChampionsGate Operating Associates, Limited Partnership

(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. New Mexico

(State or Country of Formation)

3. October 25, 2007

(Date of Formation)

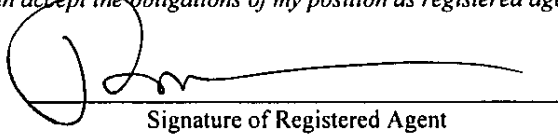
4. Robert Greene, Esq.

(Name of Registered Agent for Service of Process)

5. 1301 Sixth Avenue West, Suite 400, Bradenton, Florida 34205

(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.*

  
Signature of Registered Agent

7. 330 Garfield Street, Santa Fe, New Mexico 87501

(Principal office address)

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

9. 330 Garfield Street, Santa Fe, New Mexico 87501

(Mailing address)

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

BGK ChampionsGate LLC

(Name)

M 07000006479

330 Garfield Street

(Street Address)

Santa Fe, NM 87501

330 Garfield Street

(Mailing Address)

Santa Fe, NM 87501

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

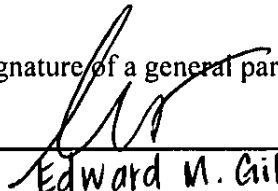
_____	_____
(Name)	(Street Address)
	_____
	(Mailing Address)
	_____
_____	_____
(Name)	(Street Address)
	_____
	(Mailing Address)
	_____

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 28th day of October, 20 07.

Signature of a general partner: BGK ChampionsGate LLC  
  
 \_\_\_\_\_  
 Edward M. Gillert,  
 Manager

<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>



OFFICE OF THE  
SECRETARY OF STATE

LPD2007102501

# CERTIFICATE

I, MARY HERRERA, SECRETARY OF STATE FOR NEW MEXICO, DO HEREBY CERTIFY

That

The attached 3 pages are true and correct copies of, Application for Certificate of Registration filed on October 25, 2007, for ChampionsGate Operating Associates, Limited Partnership, a New Mexico limited partnership, registered in the office in accordance with the provision of sections 54-2-1 through 54-2-48 NMSA, 1978 compilation this partnership was registered on October 25, 2007.



GIVEN UNDER MY HAND AND THE GREAT SEAL OF THE STATE  
OF NEW MEXICO, IN THE CITY OF SANTA FE, THE CAPITAL,  
ON THIS 29th DAY OF October, 2007 A.D.

A handwritten signature in cursive script, appearing to read "Mary Herrera".