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Office Use Only



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SECRETARY OF STATI

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EXAMINER



July 24, 2009

ANDREW MICHAELSON 250 THIRD AVENUE NORTH STE 500 MINNEAPOLIS, MN 55401

SUBJECT: ARTSPACE TALLAHASSEE LIMITED PARTNERSHIP

Ref. Number: W09000033908

We have received your document for ARTSPACE TALLAHASSEE LIMITED PARTNERSHIP and your check(s) totaling \$1008.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an aetive registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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 all (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 909A00025537

COVER LETTER

TO:	Registration Section Division of Corporations	** ,				
SUBJ	ECT: Artspace To Name of Foreign Limited					
limite	nclosed application, certificate of d partnership or limited liability is e return all correspondence conce	limited part	nership to		-	_
	Andrew Michaelso Contact Person	on		_		
	Artspace Projects, Firm/Company	Inc		_		
	250 Third Ave. North S Address	te. 500		-		TAL 200
	Minneapolis, MN 55 City, State and Zip Coo	ie		_		1009 AUG 11 SECKETAR ALLAHASS
	andrew.michaelson@arts nail address: (to be used for future and urther information concerning this	nual report no	·	_		AH IO: Y OF STA
	Andrew Michaelson	·	612	_)	333-9	<u> </u>
	Name of Contact Person		Area Code	and Da	ytime Telepho	ne Number
Enclo	sed is a check for the following a	ımount:				
(\$9651	00.00 Filing Fees Filing Fee and and Certificate of Status Status		052.50 Fili ertified Co		\$1,061.25 Certified Co Certificate o	py, and
Regis Divisi Clifto 2661	tration Section ion of Corporations on Building Executive Center Circle hassee, FL 32301		Regist Divisi P. O. I	ration on of C Box 63	ADDRESS: Section Corporations 27 FL 32314	,

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

1. Artspace Tallahassee 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.	٠	•	
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. Minnesota 3. April 20, 2009			
(State or Country of Formation) (Date of Formation)	•		
4. CORPORATION SERVICE COMPANY			
(Name of Registered Agent for Service of Process)	•		
5. 1201 HAYS STREET			
(Florida street address for Registered Agent)	अस्त	2	
TALLAHASSEE, FL 32301		919	
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 an accept the obligations of my position as registered agent. Signature of Registered Agent	AHASSEE, FLORID	2009 AUG 1 1 AK 10: 11	Section of the sectio
7. 250 Third Avenue North, Suite 500	3>	ထ	
(Principal office address)	•		
Minneapolis, MN 55401			
8. If limited partnership is a limited liability limited partnership, check box	•		

Page 1 of 3

Space Tallahassee, LLC Name Name	250 Third Avenue North, Ste. 500 Street Address Minneapolis, MN 55401
•	Mailing Address
Name	Street Address
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· .	Mailing Address AFT
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Name	Street Address
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	Mailing Address
Name .	Street Address
	Mailing Address

250 Third Ave. North, Ste. 500 (Mailing address)

	•
Name	Street Address
	Mailing Address
Name	Street Address
	Mailing Address
	·
11. Effective date, if other than the date of i	filing:
(Effective date cannot be prior to no filed by the Florida Department of S	S. T.
to the delivery of this application to	ence duly authenticated, not more than 90 days prior the Florida Department of State, by the Secretary of ly of the entity's records in the jurisdiction under the
Signed this 20 day of	of,2009
Signature of a general partner:	
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

State of Minnesota

SECRETARY OF STATE

Certificate of Formation or Registration of Limited Partnership

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The following limited partnership has been formed, or in the case of a non- Minnesota limited partnership, has registered to transact business in this state, by filing the appropriate documents with the Office of the Secretary of State on this date. This limited partnership is subject to the relevant provisions of Chapter 321.

Limited Partnership Name: Artspace Tallahassee Limited Partnership

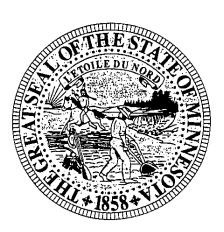
Limited Partnership Name in State of Formation: Artspace Tallahassee Limited Partnership

File Number: 3308768-2

Effective Date: 04/21/2009

State of Formation: MN

This certificate has been issued on: 04/21/2009.



Mark Ritchie
Secretary of State.