

B100000000121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

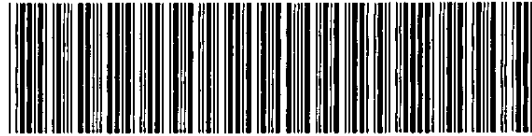
(Document Number)

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

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DIVISION OF CORPORATIONS  
2010 JUL 12 AM 11:39  
TO ACKNOWLEDGE  
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B. KOHR  
JUL 14 2010  
EXAMINER

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DIVISION OF CORPORATIONS  
10 JUL 12 PM 4:16



1203 Governors Square Blvd.  
Tallahassee, FL 32301-2960

850 222 1092 tel  
850 222 7615 fax  
www.ctlegalsolutions.com

July 12, 2010

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

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DIVISION OF CORPORATIONS  
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Re: Order #: 7886520 SO  
Customer Reference 1: None Given  
Customer Reference 2: None Given

Please  
file 2nd

Dear Department of State, Florida:

Please obtain the following:

Eola Property Trust, L.P. (DE)  
Registration  
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Christina McNeair  
CL Operations Specialist  
Christina.McNeair@wolterskluwer.com

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** EOLA PROPERTY TRUST, L.P.  
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

Amanda Allen

Contact Person

Hogan Lovells US LLP

Firm/Company

555 Thirteenth Street, NW

Address

Washington, DC 20004

City, State and Zip Code

amanda.allen@hoganlovells.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amanda Allen

at ( 202 ) 637-5593

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$1,000.00 Filing Fees ( \$965 Filing Fee and \$35 Registered Agent Fee )  
☐ \$1,008.75 Filing Fees and Certificate of Status  
☐ \$1,052.50 Filing Fees and Certified Copy  
☐ \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JUL 12 PM 4:16

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

RECEIVED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JUL 12 PM 4:16

1. EOLA PROPERTY TRUST, 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 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 3. July 7, 2010  
State or Country of Formation 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, Florida 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: Mark Brinkman C T Corporation System Vice President and Assistant Secretary  
Signature of Registered Agent

7. 390 N. Orange Avenue, Suite 2400, Orlando, Florida 32801  
Principal office address

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

9. 390 N. Orange Avenue, Suite 2400, Orlando, Florida 32801  
(Mailing address)

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

<u>Eola Property Trust</u>	<u>390 N. Orange Avenue, Suite 2400</u>
Name	Street Address
<u>D10000000019</u>	<u>Orlando, Florida 32801</u>
	<u>390 N. Orange Avenue, Suite 2400</u>
	Mailing Address
	<u>Orlando, Florida 32801</u>
<u></u>	<u></u>
Name	Street Address
	<u></u>
	Mailing Address
<u></u>	<u></u>
Name	Street Address
	<u></u>
	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 9<sup>th</sup> day of July, 20   10  

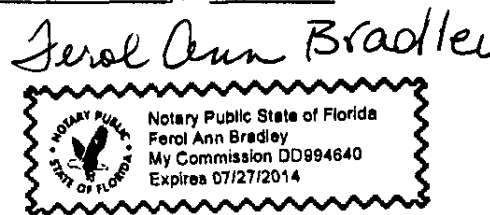
Signature of a general partner:

EOLA PROPERTY TRUST

By: \_\_\_\_\_

Name: James R. Heistand

Title: Trustee



**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

PAGE 1

*The First State*

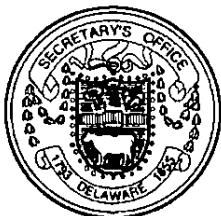
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EOLA PROPERTY TRUST, L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF JULY, A.D. 2010.

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

4845423 8300

100730484

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8104945

DATE: 07-09-10