

JAN. 5 2012 3:00 PM

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : NRAI CORPORATE SERVICES, INC.
Account Number : I20080000023
Phone : (651) 225-9500
Fax Number : (651) 225-9579

L. SELLERS

JAN 9 2012

EXAMINER

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED

12 JAN -6 AM 6:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LP/LLLP
PH-206 Naples Cay Limited Partnership

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,000.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN -6 PM 12:18

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Electronic Filing Menu

Corporate Filing Menu

Help

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

1. PH-206 NAPLES CAY 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. MINNESOTA

State or Country of Formation

3. 06-17-2011

Date of Formation

4. Name of Registered Agent for Service of Process and Florida Street Address:KATHLEEN O'CONNOR60 SEAGATE DRIVE #PH-206NAPLES FL 34103

5. 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.

Kathleen O'Connor
Signature of Registered Agent

7. Principle Office: (Florida Street Address)60 SEAGATE DRIVE #PH-206NAPLES, FL 34103**8. Mailing Address:**225 S 6TH STREET, SUITE 2800MINNEAPOLIS, MN 55402

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

10. Name, principal office address, and mailing address of each general partner:Name of General Partner: NAPLES GP, LLC

Name of General Partner: _____

Street Address: 225 S 6TH STREET, SUITE 2800

Street Address: _____

MINNEAPOLIS, MN 55402Mailing Address: 225 S 6TH STREET, SUITE 2800

Mailing Address: _____

MINNEAPOLIS, MN 55402

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

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NRAI CORPORATE SERVICES INC

NO. 8350 P. 3/4

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing 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 5th day of JANUARY, 2012.

Christine B. Davis
Signature of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

**Office of the Minnesota Secretary of State
Certificate of Good Standing**

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: PH-206 NAPLES CAY LIMITED PARTNERSHIP

Date filed: 6/17/2011

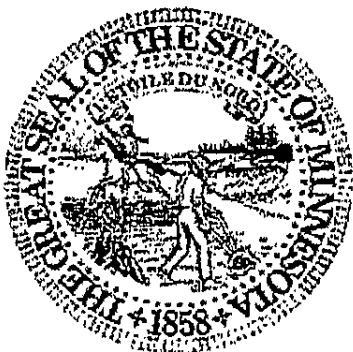
File Number: 4346453-2

Minnesota Statutes, Chapter: 321

Home Jurisdiction: Minnesota

This certificate reflects data thru: 11/02/2011

This certificate has been issued on: 01/05/2012



Mark Ritchie
Mark Ritchie
Secretary of State
State of Minnesota

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA