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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone Fax Number : (850)878-5368

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

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FLORIDA/FOREIGN LP/LLLP ASHBROOK SIMON-HARTLEY OPERATIONS, LP

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JUL - 6 2012

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COVER LETTER

		,		
TO: Registration Section Division of Corporations	5			
		orship or Limited Mability	Limited Partnership	
The enclosed application, certification, partnership to transact business in Please return all correspondence of	Florida.		a foreign limited partnership or lin	nited liability limited
James K. Bo	act Person			
Ashbrook Si	Company	Hey		
11600 E. Har	ا م ا			
Heuston Ti	k 77691	3		
E-mail address: (to be used for	m. Q. A≤- I	a notification)		
For further information concerning	g this matter, pleas	e call:		
James K. Bar	•	at (28)) 98	K- 4424	
Name of Contact Person			me Telephone Number	
Enclosed is a check for the follow	ing amount:			
(\$965 Piling Fee and \$35 Registered Agent Fee)	08.75 Filing Fees rtificate of	□ \$1,052.50 Filing Fees and Certified Copy	O\$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		2012 JUL -5 AM SECRETARY OF TALLAHASSEE, F
				SIAN SA

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

Acceptable Limited Partnership suffixes: Limited	ted Liability Limited Partnership, which must include suffix) Partnership, Limited, L.P., L.P., or Lid. suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
	ed partnership or limited liability limited partnership proposes to register to transact in Florida; must contain acceptable suffix.
2. Texas	3. 1/1/2005
State or Country of Formation	Date of Formation
4. Federal Employer Identification Number:	20-2117380
5. Name of Registered Agent for Service of Pro-	
C T Corporation System	
· · · · · · · · · · · · · · · · · · ·	
1200 South Pine Island Road	
Plantation, FL 33324	
 I hereby accept the appointment as registered a of all statutes relative to the proper and comple my position as registered agent. 	agent and agree to act in this capacity. I further agree to comply with the provisions ete performance of my duties, and I am familiar with and accept the obligations of
<u>C</u>	Connie Bryan
	Signature of Registered Agent 8. Mailing Address: ASSISTANT Secretary
7. Principal Office:	8. Mailing Address: 1 (3313CUITC 36C16CM) 9
11600 E. Hardy Rd.	Same
Houston, TX 77093	·
9. If limited partnership is a limited liability lin	nited partnership, check box.
9. If limited partnership is a limited liability lin 10. Name, principal office address, and mailing	· ~~ \(\sigma_i \sigma_i \sigma_i \)
10. Name, principal office address, and mailing	g address of each general partner: W12-3.784
10. Name, principal office address, and mailing Name of General Pariner: Acharola S Operations	g address of each general partner: 3784
10. Name, principal office address, and mailing Name of General Pariner: Acharolic S Operations Street Address:	g address of each general partner: 1
10. Name, principal office address, and mailing Name of General Pariner: Acharola S Operations	Street Address:
10. Name, principal office address, and mailing Name of General Pariner: Acharook S Operations of Street Address: 11600 E. Ha	g address of each general partner: 1
10. Name, principal office address, and mailing Name of General Partner: Achieroic S Operations Street Address:	Street Address:
10. Name, principal office address, and mailing Name of General Pariner: Achdrook S Operations of Street Address: 11600 E. Ha Mailing Address: Houston, Ty.	g address of each general partner: Street Address: ASS TOP 3 Mailing Address:
10. Name, principal office address, and mailing Name of General Pariner: Achdrook S Operations of Street Address: 11600 E. Ha Mailing Address: Houston, Ty.	Street Address: Street Address: ASR ST
Name of General Partner: Achdrook Soperations of Street Address: 1600 E. Ha Mailing Address: Houston, Ty.	g address of each general partner: Street Address: ASS TOP 3 Mailing Address:
Name of General Partner: Achdrook Soperations of Street Address: 1600 E. Ha Mailing Address: Houston, Ty.	Street Address: Name of General Partner: Name of General Partner: Street Address: Name of General Partner: Street Address:
Name of General Partner: Achdrook Some Address: 11600 E. Ha Mailing Address: Houston, Tx.	Street Address: Street Address: ASSET ASSET Name of General Partner: Name of General Partner:

	Page 1 of 2
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:	after the date this document is filed by the Florida Department of State.)
	ted, not more than 90 days prior to the delivery of this application to the rother official having custody of the entity's records in the jurisdiction under
	•
the law of which it is organized. Signed this day of day of	•
Signed this	•
Signed this	gnature of a general partner Jeff Smith ts stated herein are true and the individual is aware that false information
Signed this	gnature of a general partner Jeff Smith ts stated herein are true and the individual is aware that false information stitutes a third degree felony as provided for in s.817.155, F.S.

Page 2 of 2

SECRETARY OF STATE

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Hope Andrade Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Limited Partnership for Ashbrook Simon-Hartley Operations, LP (file number 800436378), a Domestic Limited Partnership (LP), was filed in this office on January 06, 2005.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 05, 2012.



SECRETAL STATE
ALLAHASSEE FLORIDA
Hope Andrade
Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709

TID: 10264

Dial: 7-1-1 for Relay Services Document: 428897780004