Division of Corporations **Electronic Filing Cover Sheet**

Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000027213 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

001988.180430

From:

Account Name

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714

Phone

: (850)222-1173

Fax Number

: (850)224-1640

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

Email Address:

FLORIDA/FOREIGN LP/LLLP

2104 CAHUENGA PARTNERS, L.P.

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$1,061.25

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COVER LETTER

1	00 1 201	• ₩**
TO: Registration Section Division of Corporations		
SUBJECT: 2104 Cahuenga Partners, L.P. Name of Foreign Limited Partners	ership or Limited Li	ability Limited Partnership
	•	register a foreign limited partnership or limited Hability limited
partnership to transact business in Florida. Please return all correspondence concerning this ma		again a sortigin datated participating of source and stay in the
John G. Burgee		
Contact Person		
Burgee & Abramoff, PC		
Finn/Company		
20501 Ventura Boulevard, Suite 262	2	
Address		
Woodland Hills, CA 91364		
City, State and Zip Code		
jburgee@bandalaw.net B-mall address: (to be used for future annual report	et motification)	
For further information concerning this matter, please		
John G. Burgee	_at (818	264-7575
Name of Contact Person	Area Code and	d Daytime Telephone Number
Enclosed is a check for the following amount:		
[\$1,000.00 Filing Fees (\$955 Filing Fee and \$35 Registered Agent Fee) \$1,008.75 Filing Fees and Certificate of Status	snd Centified Copy	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDI Registration Section Division of Corpor P. O. Box 6327 Tallahassee, FL 3	on rations

CT CORPORATION

FILED SECRETARY OF STATE DIVISION OF CORFORATIONS

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2013 FEB -4 AM 7: 56

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

Dustriess til i	artnership or limited liability limited prutnership proposes to register to transact llorida; must contain acceptable suffix.	
2. California	3, February 14, 2000	
State or Country of Formation	Date of Formation	
I. Name of Registered Agent for Service of Process	and Florida Street Address:	
Stuart Grossman		
201 South Biscayne Boulevard, 22nd Floor		
Miami, FL 33131		
my position as registered agent.	erformance of my duties, and I am familiar with and accept the obligations of Japan Insture of Registered Agent	
7. Principle Office: (Florida Street Address)	8. Mailing Address;	
95 North County Road	95 North County Road	
Palm Beach, FL 33480	Palm Beach, FL 33480	
)	
9. If limited partnership is a limited liability limited		
\\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	radiococo 24x LL	
, ,		
Name of General Partner: Millennium Holdings, in		
Name of General Partner: Millennium Holdings, in Street Address: 95 North County Road	Stroot Address:	
Name of General Partner Millennium Holdings, in Street Address: 95 North County Road Palm Beach, FL 3348	Street Address:	
Name of General Partners Millennium Holdings, in Street Address: 95 North County Road Palm Beach, FL 3348 Mailing Address: 95 North County Road	Street Address: Mailing Address:	
Street Address: 95 North County Road Palm Beach, FL 3348	Street Address: Mailing Address:	
Name of General Partner: Millernium Holdings, in Street Address: 95 North County Road Palm Beach, FL 3348 Mailing Address: 95 North County Road Palm Beach, FL 334 Name of General Partner:	Street Address: Mailing Address:	

SECRETARY OF STATE
DIVISION OF CORFORATIONS

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2013 FEB -4 AM 7: 56

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 day.	s after the date this document is filed by the Florida Department of State.)
12. Attached is a certificate of existence duly authentics	ated, not more than 90 days prior to the delivery of this application to the other official having custody of the entity's records in the jurisdiction under
Signed this 1st day of February	
The individual signing this document affirm that the fac-	Ighatore beg general partner Established herein are true and the individual is aware that false information stillutes a third degree felony as provided for in s.817.155, F.S.
Filing Fers: Certified Copy (optional): Certificate of Status (optional):	 ∨ \$1,000.00 (\$965 Füing Fee and \$35 Registered Agent Fee) \$8.75

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State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: 2104 CAHUENGA PARTNERS, L.P.

FILE NUMBER: FORMATION DATE:

200004600029

PONINA

02/14/2000

TYPE:

DOMESTIC LIMITED PARTNERSHIP

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 1, 2013.

DEBRA BOWEN
Secretary of State

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