Division of ran Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Email Address:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone : (850)222-1092

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.

FLORIDA/FOREIGN LP/LLLP **ASW II LIMITED PARTNERSHIP**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$1,000.00

Electronic Filing Menu

Corporate Filing Menu

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https://efile.sunbiz.org/scripts/efilcovr.exe

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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJECT	CT: ASW II Limited Partnership
	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:

Lee Ann Shamblin				•
	Contact Person		•	
Transmell Crow Residen	atia)			
	Firm/Company		•	
3819 Maple Avenue		·		
-	Address		•	
Dallas TX 75219				
C	ity, State and Zip Code		•	
lshamblin@tcresidential	.com			
E-mail address: (to be	used for future annual repor	rt notification)	•	
For further information of	oncerning this matter, pleas	se call:		
Lee Ann Shamblin		al (²¹⁴	922-84	80
Name of Contac	et Person		d Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:			
U\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	11,008.75 Filing Fees and Certificate of Status	© \$1,052.50 Filing and Certified Cop.	y	(i \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle	MAILING ADDI Registration Section Division of Corpo. P. O. Box 6327 Tallahassee, FL 3	on rations	

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

SECRETARY OF STATE TALLAMASSEE, FLORIDA

Acceptable Limited	Partnership suffixes: Limited Partner	bility Limited Partnership, which must include suffix) rship, Limited, L.P., LP, or Ud. : Limited Liability Limited Partnership, L.L.L.P. or LLLP.			
If name unavailabl	e, name under which the limited partr business in Flor	nership or limited liability limited partnership proposes to register to transact rids; must contain acceptable suffix.			
2. Delaware		3. 02-27-2013			
S	tate or Country of Formation	Date of Formation			
4, Federal Employe	er Identification Number: not yet av	ailable			
	red Agent for Service of Process an				
C T Corporation Sy	rtem				
1200 South Pine Isl	and Road				
Plantation, Florida	33324				
	alive to the proper and complete perfe glstered agent. C T Corporation By: Mana				
7. Principal Office:		8. Muiling Address:			
-		3819 Maple Avenue			
Dallas TX 75219		Dallas TX 75219			
9. If limited partne	ership is a limited liability limited p	artnership, check box .			
10. Name, princips Name of Genera	l office address, and mailing addre	ss of each general partner: d Partner- Ship Ship			
Street Address:	3819 Maple Avenue	Street Address:			
	Dallas TX 75219				
Mailing Address: 3819 Maple Avenue		Mailing Address:			
	Dailas TX 75219				
Name of Genera	l Partner:	Name of General Partner:			
Street Address		Street Address:			
44401 AUGI 044-					

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Name of General Partner:	Page 1 of 2 Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
12. Attached is a certificate of existence duly authenticate	vs after the date this document is filed by the Florida Department of State.) ated, not more than 90 days prior to the delivery of this application to the or other official having custody of the entity's records in the jurisdiction under
Signed this By: NF 105 Development GP LLC, its Gr	eneral Parener
S By: Lee	Signature of a general partner Ann Shamblin, Assistant Secretary to 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 Foes:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50

Certified Copy (optional): Certificate of Status (optional):

\$8.75

Page 2 of 1

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ASW II LIMITED PARTNERSHIP" 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 FIRST DAY OF MARCH, A.D. 2013.

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

5295430 8300

130248690

You may verify this certificate ealine at corp. deleware. gov/authver. shtml

AUTHENTICATION: 0251045

DATE: 03-01-13

03/01/2013 14:39 8656336092 CT CORPORATION