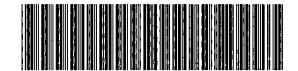
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

## **COVER LETTER**

COVER DEL LEG						
TO: Registration Section Division of Corporations						
New Providence Rolling Acres, 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:						
Marvin S. Rosen						
Contact Person						
Rosen Law Group P.A.						
Firm/Company						
222 Lakeview Avenue, Suite 1500						
Address						
West Palm Beach, FL 33401						
City, State and Zip Code						
marvin@rosenlawfl.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Marvin S. Rosen at 61 318-3250						
Name of Contact Person Area Code and Daytime Telephone Number						
Enclosed is a check for the following amount:						
□\$1,000.00 Filing Fees □\$1,008.75 Filing Fees □\$1,052.50 Filing Fees (\$965 Filing Fee and Certificate of and Certified Copy S35 Registered Agent Status  Status  □\$1,061.25 Filing Fee, Certified Copy, and Certified Copy 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

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

New Providence Rolling Acres, 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. Delaware 12/20/2012 Date of Formation State or Country of Formation 4. Federal Employer Identification Number: 46-1728633 5. Name of Registered Agent for Service of Process and Florida Street Address: Marvin S. Rosen 222 Lakeview Avenue, Suite 1500 West Palm Beach, FL 33401 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. Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 340 Royal Poinciana Way 340 Royal Poinciana Way Palm Beach, FL 33480 Palm Beach, FL 33480 9. If limited partnership is a limited liability limited partnership, check box . 10. Name, principal office address, and mailing address of each general partner:

Rolling Acres GP Blocker, Inc. + 13-1294 Name of General Partner: Rolling Acres GP Blocker, Inc. P13-129 Y
Name of General Partner: Name 340 Royal Poinciana Way Street Address: \_ Street Address: \_ Palm Beach, FL 33480 Mailing Address: 340 Royal Poinciana Way \_\_\_\_ Mailing Address:\_\_\_\_\_ Palm Beach, FL 33480 Name of General Partner:\_\_\_\_\_\_ Name of General Partner: Street Address: Street Address: Mailing Address: Mailing Address:

Name of General Partner:		e 1 of 2 Name of General Partner:			
Street Address:				Street Address:	
Mailing Address	3:			Mailing Address:	:
11. <b>Effective date, i</b> ( <i>Effective date canno</i>	f other than the	e date of filing or more than 90	;:	e this document is	s filed by the Florida Department of State.)
	of State, by the				or to the delivery of this application to the of the entity's records in the jurisdiction under
Signed thisMa	rch	day of	15th	13	
		By:	Signature of a	OSCOY, P	Inc. resident

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

Page 2 of 2



## Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NEW PROVIDENCE ROLLING ACRES, 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 SECOND DAY OF MARCH, A.D. 2013.

5267965 8300

130253652

AUTHENTY CATION: 0270055

DATE: 03-08-13

You may verify this certificate online at corp.delaware.gov/authver.shtml