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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

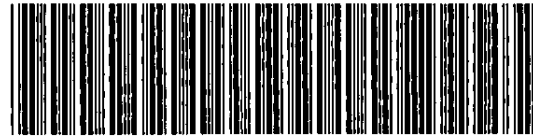
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 24 2014 ✓

N. CAUSSEUX

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HWP Parks Arlington II, Ltd.

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:

Thomas L. Bloodworth

Contact Person

Bloodworth Carroll, P.C.

Firm/Company

10000 N. Central Expressway, Suite 1050

Address

Dallas, Texas 75231

City, State and Zip Code

bloodworth@bcrelaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas L. Bloodworth

at (**214**) **234-2722**

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
 \$1,008.75 Filing Fees and Certificate of Status
 \$1,052.50 Filing Fees and Certified Copy
 \$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

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

1. HWP Parks Arlington II, Ltd.

(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. Texas

State or Country of Formation

3. 6/19/2003

Date of Formation

4. Federal Employer Identification Number: 03-0521598

5. Name of Registered Agent for Service of Process and Florida Street Address:

Averitt & Co., P.A.

3010 South 3rd St., Suite B

Jacksonville Beach, FL 32250

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:

6909 Vassar Drive

Dallas, Texas 75205

8. Mailing Address:

6909 Vassar Drive

Dallas, Texas 75205

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: HWP GP, Inc. F14-807 Name of General Partner: _____

Street Address: 6909 Vassar Drive Street Address: _____

Dallas, Texas 75205

Mailing Address: 6909 Vassar Drive Mailing Address: _____

Dallas, Texas 75205

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

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

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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 _____ day of **February**, 20 **14**

HWP GP, INC.

Terry N. Worrell
Terry N. Worrell, President

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

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TALLAHASSEE, FLORIDA

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



Nandita Berry
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 HWP Parks Arlington II, Ltd. (file number 800216246), a Domestic Limited Partnership (LP), was filed in this office on June 19, 2003.

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

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TALLAHASSEE, FLORIDA

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 February 05, 2014.



NANDITA BERRY

Nandita Berry
Secretary of State