

**B14000000351**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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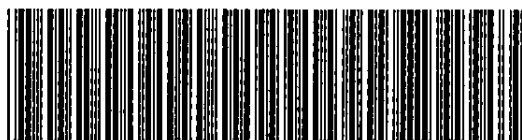
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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2014 NOV -5 PM 4: 01  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

NOV 06 2014  
J. BRUCE

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Timberlock Partners II, LP  
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:

Trey Brice

Contact Person

Six Pines Realty, LLC

Firm/Company

1717 Woodstead Ct, Suit 207

Address

The Woodlands, TX 77380

City, State and Zip Code

tbrice@prestonexpl.com

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

For further information concerning this matter, please call:

Trey Brice

Name of Contact Person

at ( 281 ) 367-8697 x 142

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

CLERK OF STATE  
TALLAHASSEE, FLORIDA

2014 NOV -5 PM 4: 01

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

1. Timberlock Partners II, LP  
(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. September 17, 2014 Date of Formation

4. Federal Employer Identification Number: 47-2005285

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

Michael E. Wright  
1350 Orange Ave, Suite 250  
Winter Park, FL 32789

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]  
Signature of Registered Agent

7. Principal Office:

Timberlock Partners II, LP  
1350 Orange Ave, Suite 250  
Winter Park, FL 32789

8. Mailing Address:

Timberlock Partners II, LP  
1350 Orange Ave Suite 250  
Winter Park, FL 32789

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: MMI Beams Road, LLC Name of General Partner: \_\_\_\_\_

Street Address: 1350 Orange Ave, Suite 250 Street Address: \_\_\_\_\_  
Winter Park, FL 32789

Mailing Address: 1350 Orange Ave, Suite 250 Mailing Address: \_\_\_\_\_  
Winter Park, FL 32789

Name of General Partner: L12000085106 Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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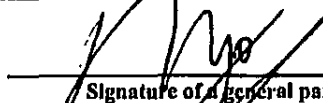
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Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_  
Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_  
\_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

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 28<sup>th</sup> day of October, 2014

  
\_\_\_\_\_  
Signature of a general partner

The individual signing this document affirms 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

**FILED**  
2014 NOV -5 PM 4:01  
SECRETARY OF STATE  
PALM BEACH COUNTY, 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 Formation for Timberlock Partners II, LP (file number 802065031), a Domestic Limited Partnership (LP), was filed in this office on September 17, 2014.

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 October 28, 2014.



FILED  
2014 NOV - 5 PM 4:01  
SECRETARY OF STATE  
ALEXANDER FLORIDA

*NANDITA BERRY*

Nandita Berry  
Secretary of State