

# B15000000109

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
 Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
 Phone : (850) 205-8842  
 Fax Number : (850) 878-5368

FILED  
15 APR 30 PM 12:20  
STATE OF FLORIDA  
TALLAHASSEE

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

Email Address: \_\_\_\_\_

15 APR 30 6:10:00  
TALLAHASSEE  
REGISTRATION SERVICES

FLORIDA/FOREIGN LP/LLP  
Jamestown Urban Management, L.P.

Certificate of Status	1
Certified Copy	1
Page Count	06
Estimated Charge	\$1,061.25

Please File 2nd  
After GB Qual

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Jamestown Urban Management, 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:

Wendy Chambers

Contact Person

JAMESTOWN

Firm/Company

675 Ponce de Leon Ave., NE, 7th Floor

Address

Atlanta, GA 30308

City, State and Zip Code

wendy.chambers@jamestownLP.com

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

For further information concerning this matter, please call:

Wendy Chambers

at (770) 805-1017

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

FILED  
15 APR 30 PM 12:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. Jamestown Urban Management, 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.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. Delaware

State or Country of Formation

3. 4/27/2015

Date of Formation

4. Federal Employer Identification Number: 47-3859581

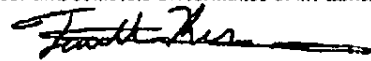
5. Name of Registered Agent for Service of Process and Florida Street Address:

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324

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.



Terrell Kearney Asst. Secretary

Signature of Registered Agent CT Corporation System

7. Principal Office:

Ponce City Market

675 Ponce de Leon Ave., NE, 7th Floor

Atlanta, GA 30308

8. Mailing Address:

Ponce City Market

675 Ponce de Leon Ave., NE, 7th Floor

Atlanta, GA 30308

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: JT Management GP, LLC

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

Street Address: 675 Ponce de Leon Ave., NE, 7th Floor

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

Atlanta, GA 30308

Mailing Address: 675 Ponce de Leon Ave., NE, 7th Floor

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

Atlanta, GA 30308

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

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

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

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 28th day of April, 202015

see attached  
Signature of a general partner

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.

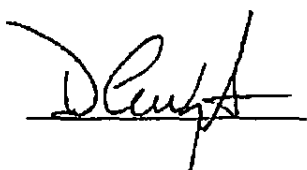
<b>Filing Fees:</b>	<b>\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)</b>
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

4/30/2015 2:18:52 PM From: To: 8506176383( 5/6 )

**GENERAL PARTNER:**

**JT MANAGEMENT GP, LLC,  
a Delaware limited liability company**

**By: Jamestown Properties Corp.,  
a Georgia corporation  
its sole member**

By: A handwritten signature in black ink, appearing to be 'D. Kemp', is written over a horizontal line.

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JAMESTOWN URBAN MANAGEMENT, 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 TWENTY-NINTH DAY OF APRIL, A.D. 2015.

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

5736439 8300

150587303

You may verify this certificate online  
at [cosp.delaware.gov/authver.shtml](http://cosp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2334716

DATE: 04-29-15