8/25/2015 9:55:49 AM From: To: 8506176383(1/6) Division of Corporations

Page 1 of 1

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.

(((H15000204820 3)))



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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

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

Email Address:

FLORIDA/FOREIGN LP/LLLP

Broadstone Passerelle, LP

Certificate of Status	0
Certified Copy	0
Page Count	06
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8/25/2015

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Broadstone Passerelle, 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 of limited Bability limited partnership to transact business in Florido.

Please return all correspondence concerning this matter to:

Josnna Co	ontarino	
	Contact Person	
Alliance R	Residential, LLC	
	Firm/Company	
2415 E. C	amelback Rd. Ste 600	
•	Address	
Phoenia	AZ 85016	
-	City, State and Zip Code	
Adam Kur	nkin receives Annual Reports - adam@bkcp	apc.com

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

For further information concerning this matter, please call:

Trina Armstrong

Name of Contact Person

Area Code and Daytime Telephone Number

259-0924

Enclosed is a check for the following amount:

\$1,000,00 Filing Fees (\$965 Filling Fee and \$35 Registered Agent

Fee)

 \$1,008.75 Filling Fees and Certificate of

Status

.: \$1,052.50 Filing Fees and Certified Copy

1:\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS: Registration Section Division of Corporations Clifton Building

2661 Executive Center Circle Tullahassee, FL 32301

MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahasses, FL 32314

Color - 2.25 State as a section of dates

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

Broadstone Passerelle, 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 partners business in Florida	ship or limited liability limited partnership proposes to register to transact			
2. TX	3, 08/19/2015			
State or Country of Formation	Date of Formation			
4. Federal Employer Identification Number 47-4804838				
5. Name of Registered Agent for Service of Process and F C T Corporation System	Plorida Street Address:			
1200 South Pine Island Road				
Planution, Florida 33324				
of all statutes relative to the proper and complete perform my position as registered agent. C T Corporation Sy: By:	stem Michael E. Jones Michael E. Jones			
7. Principal Office:				
2415 E. Camelback Rd. Ste 600	8. Mailing Address: 2415 E. Camelback Rd. Sie 600			
Phoenix AZ 85016	Phoenix A2 85016			
9. If limited partnership is a limited limbility limited part 10. Name, principal office address, and mulling address SEE ATTACHED	inership, check box .			
Name of General Partner: SEE ATTACHED	Name of General Partner:			
Street Address:	Street Address:			
Mailing Address:	Mailing Address:			
Name of General Partner:	Name of General Puriner:			
Stroet Address:	Street Address:			
Mailing Address:	Mailing Address:			

Name of General	Partner:	I of 2 Name of General Purmer:		
Street Address:		Street Address:		
Mailing Address:		Mailing Address:		
11. Effective date, if (Effective date cannot	other than the date of filing: be prior 10 nor more than 90 days after the do	te this ducument is filed by the Florida Department of State.)		
13. Ansched is a certi- Florida Department of the law of which it is t	ficate of existence duly authenticated, not more State, by the Secretary of State or other officiorganized.	than 90 days prior to the delivery of this application to the all having custody of the entity's records in the jurisdiction under		
Signed this day of August 20 15 Allance G.P. III Inc. General Partner Signature alla general partner V. Juy Hiomeriz, Vice President				
	; this document affirm that the facts stated hen	in are true and the individual is aware that false information d degree felony as provided for in s.817.155, F.S.		
Cer	ng Fees: \$1,00 tiffed Cupy (uptional): \$52.5 tiffcate of Status (optional): \$8.75	•		

Page 2 of 2

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2015 AUG 25 A & 51:-

曹操権の政権の対象がある。「東京の関係の企業のであっているとは、このとは、このというでは、東京の政権を表現して、東京の政策を表現の関係を対象を対象を対象を支援を表現を表現している。

ADDENDUM TO APPLICATION BY FOREIGN LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

LIMITED PARTNERSHIP - BROADSTONE PASSERELLE, LP

GENERAL PARTNER:

Alliance G.P. II, Inc. 2415 E. Camelback Road, Suite 600

Phoenix, Arizona 85016 15000003451

LIMITED PARTNERS:

Broadstone Passerelle Alliance, LLC 2415 E. Camelback Road, Suite 600 Phoenix, Arizona 85016

PCP-RECP Broadstone Passerelle, L.P. 15725 North Dallas Parkway, Suite 230 Addison, Texas 75001

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



Carlos H. Cascos Secretary of State

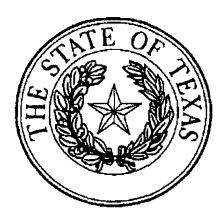
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Broadstone Passerelle, LP (file number 802276385), a Domestic Limited Partnership (LP), was filed in this office on August 19, 2015.

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 August 24, 2015.



Carlos H. Cascos Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/

Phone: (512) 463-5555 Fax: (512) 463-5709
Prepared by: SOS-WEB TID: 10264

Dial: 7-1-1 for Relay Services Document: 626880000003