

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED
PARTNERSHIP
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 NOV 20 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **B94000000300**

1. Name of Limited Partnership

Buzzman Partners II, LP

2. Principal Office Address - No P.O. Box #

2795 E Cottonwood Pkwy

3. Mailing Office Address

2795 E Cottonwood Pkwy

Suite, Apt. #, etc.

#400

Suite, Apt. #, etc.

#400

City & State

Salt Lake City, UT

City & State

Salt Lake City, UT

Zip

84121

Country

USA

Zip

84121

Country

USA

4. Date Formed or Registered
To Do Business in Florida

7/27/1994

5. FEI Number

232771843

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

CT Corporation

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited
partnership revoked on our records.

☐ A \$500 penalty is due for each year or part thereof the entity's
certificate of authority was revoked on our records, except in
circumstances which the entity did not receive the prior notices.
By checking this box, you are certifying the prior notices were not
received and requesting the \$500 penalty fee(s) be waived.

9. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

James Martin

James Martin

Assistant Secretary

DATE

11/18/09

(REGISTERED AGENT MUST SIGN)

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

10. Name(s) of General Partner(s)

Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

City, State and Zip Code

10a. Registration
Document Number

ESS PRISA LLC

**2795 E Cottonwood Pkwy
Suite 400**

Salt Lake City, UT 84121

M05000003677

REINSTATEMENT 08-09

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

10-8-09

Typed or Printed Name of General Partner Signing Form

Charles L. Allen for ESS PRISA II, LP

Telephone Number

801-562-5556



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2009

BUZZMAN PARTNERS II, LIMITED PARTNERSHIP
2795 E COTTONWOOD PKWY, SUITE #400
SALT LAKE CITY, UT 84121

SUBJECT: BUZZMAN PARTNERS II, LIMITED PARTNERSHIP
Ref. Number: B94000000300 *

We have received your document for BUZZMAN PARTNERS II, LIMITED PARTNERSHIP and your check(s) totaling \$2000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 309A00034769