Document Number Only 000000155 CT CURPORATION SYSTEM Requestor's Name 660 EAST JEFFERSON STREET Address TALLMASSEE FL. 32301 222-1092 City State Zło **Phone** CORPORATION(S) NAME ()-<u>900001476299</u> -U57U4795--U1121--D01 -***1846.25 ***1846.25 Boy Kind Mini Whatel limited Partners () Profit () NonProfit () Amendment () Merger () Limited Liability () Foreign () Dissolution/Withdrawal () Mark M.Limited Partnership () Annual Report () Other 👙 () Reinstatement () Change of R.A. () Fict. Filing () Reservation Certified Copy () Photo Coples X CUS) Call When Ready () Call if Problem () After 4:30 {∕LWalk In () Will Wait () Pick Up (') Mail Out Name 14/ Avallability 3.00 PLEASE RETURN EXTRA COPIES Document FILE STAMPED J.2-55 Examiner i. IN Updater TUMG Verlier AGENT FEE 1. GOPY ___ Acknowledgment

BANK _

ALANCE OUE _

W.P. Verifier

CR2E031 (1-89)

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

•	Boykin Miami Hotel Limited (Name of limited partnership as it is in the	O TRANSACT BUSINESS IN FLORID	
	, ==	nome state;	
	2		
	.(If name is unavailable, name under which transact business in Florida; must contain	And P. S.	
	transact business in Florida; must contain	the word "I MITED"	register or
	3Ohio	- 3. 210. /	
	(State of Formation)	4. <u>April 14, 1995</u>	
		(Date of Format	tion)
	5 .		•
	(Name of Registered Age	RPORATION SYSTEM	_
	6 c/o C T c	nt for Service of Process)	- C < (2)
		ystem, 1200 South Pine Island Road	55
	i and the filt	stered Office)	
	Plantation (City)	, Florida33324	- 10 TO THE
	· ••	17in 0	. ~ ~17
	7.Acceptance by the Registered Agent for S	Service of Process	ZH SST
	_		PHI2: 22
		PRATION SYSTEM	2
	10#100	lan	•
	PECIAL ASSISTANT SE	t sign on this line)	
_	(Type Name a	and Title 6 Garden	
8. (Address of Registered Office required in the	in 44113	
Pri	Address of Registered Office required in Stancipal Office.)	ite of Formation or if not so	
0	Alana a	or, in thos required, Ad	dress of
9.	NAME OF GENERAL PARTNERS	00000	
	Miami Real Estate Company	SFECIFIC ADDRES	SS
	, ,,,,9	1500 Terminal Tower, Cleveland	, ОН 44113
	F93 -3149		
	•		
10	1500 Terminal Town G1		
10	1500 Terminal Tower, Cleveland, OH 44	113	
44 -	(Office where Names, Addresses and	Contributions of Limited Partners are	
COnt	The limited partnership will undertake to kee ributions of the limited partner or limited partner or limited partner.	the records listing at	kept.)
in Fig	ributions of the limited partner or limited par prida is cancelled or withdrawn.	tners until the limited pages ar	nd capital
	10 Sericelled Of MILIGIAMU.	partnership's re	gistration
19	1500 Torminal Taxas		
۰۷	1500 Terminal Tower, Cleveland, OH 441	113	

(Mailing Address of Limited Partnership)

This // Pau	day of	. 19 95 . Real Estate Company	GNAN-2 PILE
STATE OF	OHIO		22
COUNTY OF	CUYAHOGA		
THE FOREGO	OING instrument was acknowledged , 19 95 , by Paul A. O'Neil, Tr Miami Real Estate	d and sworn to before me	this // day General Partner) of
Boykin Mi	lami Hotel Limited Partnership	•	
(Name of Lim	nited Partnership), An <u>Ohio limited</u> on behalf of the Limited Partnership.	d partnership (State o	r Country) Limited
Ž.	Main Hellis		
7-7-	, ·	LINDA M. HIRAKIS, Notary Pub State of Ohio, Cuyahoga Coun fy commission expires Oct. 6, 19	
(SEAL)	My Commission Expires:	, 11	

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared as an officer of Miami Real Estate Company, General Partner of Boykin Miami Botel Limited Partnership, an Ohio limited partnership, hereinafter referred to as the "Fartnership," who certifies as follows:

1,000,000			
2. The anticipated amount are allocated for the pur \$\frac{1,000,000}{}	of the capital contributions of the limited partners to poses of transacting business in Florida is	DIVISION	SECRET
This <u>257</u> day of <u>April</u> FURTHER AFFIANT SAYETH	, 1995. NOT.	-2 PH 12:	

Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.

MIAMI REAL ESTATE COMPANY, an Ohio Corporation General Partner

By: Paul A. O'Neil, Treasurer

STATE OF OHIO

COUNTY OF CUYAHOGA

DATE <u>4-25-95</u>

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared fact Q. Ordert as an officer of Miami Real Estate Company which is the General Partner of Boykin Miami Hotel Limited Partnership, known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and Silhe acknowledged to me and before me that (silhe executed this Affidavit as General Partner of said partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 35 day of april 1995.

Donne Winter
Notary Public

(Seal) BSD3474:32065;86001;AFFTDAVIT.FL

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE



ANNUAL REPORT 1996	Secretary of State DIVISION OF CORPORATIONS		IONS	FILED		
1. Name of Limited Partnership 1a. DOCUMENT # B95000000155			#	96 FEB 26 PM 2: 15		
)155 SECR		SECRETARY OF STATE LLAHASSEE. FLORIDA	
OYKIN MIAMI HOTEL	LIMITED PARTNERS	3MP	Ĺ		ITE IN THIS SPACE	
			2	New Maring Address. If Applic	able	
laiting Address	Principal Office Add	280	s	Guitu, Apt. ≢. etc		
00 TERMINAL TOWER	1900 TERMINAL TO	WER	City, State & Zip			
EVELAND OH 40113	CLEVELAND ON 441	13	2	New Principal Office Address	». II Апрісина	
above addresses are incorrect in any way, th	e through the incorrect information and s	inter correct address in Bio	l s	_{ioto Ant a etc} "U3/U1	1"Apperent 729126 79601039010 76.25 ****576.25	
Date Formed or Registered to Do Busines FLORIDA 05/02/1995	<u> </u>	4. State or Country of OH		ity, State & Zip		
Sa. Capital - Houtions as Shown on Recours \$1,000,000.00	Amount of Capital Contributions in FLORIDA to date	6. FEI Number 34. 179	3618	Applied For 7.	CERTIFICATE OF STATUS REQUIRED SECTION AND INCOME. THE PROPERTY OF THE PROPER	
Note: If the			10. If changed, now Registered Agent/Office Namo Suite Apt #. etc			
		City			FL Zip Coxle	
	wed office or registered agent, or both, in the obligations of section 620, 192, Florida pointment)	the Strice of Florida Such a Statutes.	change was authori	ized by its genural partner(s) Ther	oby accept the appointment of register	
1. Name(s) of General Portner(s)	11a. Address	s of Ench General Partner se Port Office Box Number	_{s)} 11b.	City, State & Zip Code	11c. Registrative Document Number	
BOY FAIR MANN REAL ESTATE COMPANY	1500 TERMIN	al Yoyi <i>a</i> r	CLEVE	LAND OH 44113	F93000003249	

12.	I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes Trelease the Division of
	Corporations from any tiability of non-compliance with Section 119 07(3)(k) 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 esculpte and that my signature shall have the same legal effects as if made under oath it further certify that I am a General Partner of the limited partnership receiver or truste-
	empowered to execute this rupor; it, required by chapter 620. Florida Statutes

	SI	Ģ١	VΑ	Ц	J۴	<u>"</u> ⊏
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Typed or Printed Name of General Partner Signing Form

abul Transurer of G.P. DATE 2/19/16

Telaphone Number

0013298

CH2E003 (6/95)