

B98000000019

CAPITOL SERVICES d/b/a  
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)

1406 Hays Street, Suite 2

(Address)

Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 JAN -4 PM 2:24

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. TST Gateway Center Limited Partnership  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 12/30

☐ Mail out

☐ Will wait

☒ Photocopy Stamped

☐ Certified Copy

\*\*\*\*\*87.50 \*\*\*\*\*87.50

☐ Certificate of Status

200002385992-7  
-12/30/97--01056--031

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark

1/4/98  
W97-  
28897  
BKC  
1/4/98

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

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DIVISION OF CORPORATIONS  
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December 30, 1997

CAPITOL SERVICES

TALLAHASSEE, FL

SUBJECT: TST GATEWAY CENTER LIMITED PARTNERSHIP  
Ref. Number: W97000028897

We have received your document for TST GATEWAY CENTER LIMITED PARTNERSHIP and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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) 487-6917.

Gretchen Harvey  
Corporate Specialist Supervisor

Letter Number: 797A00060872

1/4/98

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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1. TST GATEWAY CENTER LIMITED PARTNERSHIP  
(Name of limited partnership as it is in the home state)
2. \_\_\_\_\_  
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")
3. Delaware 4. 10/28/97  
(State of Formation) (Date of Formation)
5. Corporation Service Company  
(Name of Registered Agent for Service of Process)
6. 1201 Hays Street  
(Street Address of Registered Office)  
Tallahassee, Florida 32301  
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process.  
Vicki Schreier Asst Vice President  
(Agent must sign on this line)
8. c/o Tishman Speyer Properties, 520 Madison Avenue, New York, NY 10022  
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS  
Tishman Speyer/Travelers Associates 520 Madison Avenue, New York, NY 10022  
G9736400020  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. 520 Madison Avenue, New York, NY 10022  
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is cancelled or withdrawn.

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98 JAN 14 PM 2:24

12. c/o Tishman Speyer Properties

520 Madison Avenue, New York, NY 10022

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This day of 8, December, 19 97.

Tishman Speyer/Travelers Associates, general partner

By: TSCE Real Estate Venture, L.P., general partner

By: TSCE Venture Corp., general partner

Andrew J. Nathan, Secretary of General Partner

STATE OF New York

COUNTY OF New York

On this 8<sup>th</sup> day of December, 19 97, Andrew J. Nathan

personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

Katherine A. Pronevich  
(Notary Public Signature)

(Notary's Printed Name) KATHERINE A. PRONEVICH  
NOTARY PUBLIC, State of New York  
No. 4929433  
Qualified in Westchester County  
Commission Expires May 31, 19 98

Seal

My Commission Expires: \_\_\_\_\_

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED  
PARTNERSHIP**

BEFORE ME the undersigned personally appeared Andrew J. Nathan, Secretary of TSCE Venture Corp.,  
General Partner of TSCE Real Estate Venture, L.P., General  
Partner of Tishman Speyer/Travelers Associates,  
a general partner of TST Gateway Limited Partnership (an) Delaware limited partnership,  
hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 100.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 0.

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 8 day of December, 19 97.

[Signature]  
Andrew J. Nathan, Secretary of General Partner

STATE OF New York

COUNTY OF New York

On this 8th day of December, 19 97, Andrew J. Nathan  
personally appeared before me,

☒ who is personally known to me  
☐ whose identity I proved on the basis of \_\_\_\_\_

[Signature]  
(Notary Public Signature)

\_\_\_\_\_  
(Notary's Printed Name) **VALENTA A. PRONEVICH** PUBLIC, State of New York  
No. 4929433

Qualified in Westchester County  
Commission Expires May 31, 19 98

My Commission Expires: \_\_\_\_\_

Seal