Bocument Number 2018/8/00/00/00/703

CT Corporation	System			
Requestor's Name 660 East J effe	rson Stre	et	-	· -
Address Tallahassee, F	L 32310 2	222-1092		6000027138464 -12/17/9801001017 ***1793.75 ***1793.75
City State	Zip	Phone		***1793.75 ***1793.75
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() Profit			ŭ	5
() NonProfit		() Amendm	ent	() Merger
() Foreign		() Dissolution	on/Withdrawa	() Limited Liability Company
Limited Partnership () Reinstatement () Fictitious Name)	() Annual R () Name Regi () UCC-1 Fir	stration	() Other () Change of R.A. ement() UCC-3 Filing
() Certified Copy		() Photo Co		Cus
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CR2E031 (1-89)

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

 Arizona Coral Point Apartment 	s Limited Partnership
(Name of limite	d partnership as it is in the home state)
	ي الم
2	
(If name is unavailable, name under which the h	imited partnership proposes to register or transact business in Flories
must contain	the word "LIMITED" or "LTD.")
	'
3. Arizona	4. <u>March 13, 1998</u>
(State of Formation)	(Date of Formation)
CT Corporation System	
(Name of Registered Ag	ent for Service of Process)
•	•
6. 1200 South Pine Island Road	
	Address of Registered Office)
(Siteer 2	address of Registered Office)
71	
Plantation	, Florida 33324
(City)	(Zip Code)
7 Accompany by the Bosistand Asset for Com-	See a S December 2
7. Acceptance by the Registered Agent for Serv	
	CONNE BRYAN
l'es	SPECIAL ASSISTANT SECRETARY
(Age	ent must sign on this line)
	~
8. 3225 North Central Avenue	
D1. 4 45 05070	
Phoenix, AZ 85012	
(Address of registered office required in st	ate of formation or, if not required, address of principal office.)
A MANGE OF CENTER LY DARROWS	
9. NAMES OF GENERAL PARTNERS	STREET ADDRESS
Coral Point Apartments Operat	ino (Company)
OPERATE TO THE REPORT OF ETAL.	ing Company 2343 West Main Street
£ .	
The most of the	Mesa, Arizona 85201
+9X WWW.010101) riesa, Arizona 65201
T. C.	
	<u> </u>
10. 1004 Farman Street, Omaha, NE	68102
(Office where Names, Address	es 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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

Omaha NE 60102	
Omaha, NE 68102 (Mailing Address of Li	mited Partnership)
Under penalties of perjury I, being duly sworn, declare that I and that the facts stated herein are true and correct.	have read the foregoing and know the contents thereof
Signed this 16 day of <u>September</u> Coral Point Apartments Oper By: General Pa	,19 <u>98</u> ating Company wher Michael Thesing, Vice President
STATE OF <u>Nebraska</u>	
COUNTY OF Douglas	· -
On this 16 day of September	19_98
Michael Thesing	personally appeared before me,
who is personally known to me	-
_	-
	- · · · · · · · · · · · · · · · · · · ·
who is personally known to me whose identity I proved on the basis of	- · · · · · · · · · · · · · · · · · · ·

My Commission Expires:

A GENERAL NOTARY-State of Nebraska NANCY R. TARGY My Comm. Exp. ASE 4, 1999

`AFFÏDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

BEFORE ME the unde	ersigned personally appeared Arizona Coral Poin	d Michael Thesing,	Vice Pr	esident of Cora	L Point Operating
a general partner of _	Limited Partnershi	p Apartments	_, a (an)	Arizona	Company
limited partnership, he	reinafter referred to as the "l	Partnership", who certifies	as follows:		Sole Control
1. The amount of capi	ital contributions of the limit	ted partners is \$ 1,000,00	<u>o</u> .		5 GE
2. The anticipated am	ount of the capital contributi	ons of the limited partner	s that are all	ocated for the purposes	of P
transacting business	in Florida is \$ 1,000,000	<u>.</u> .			3. 46
Under the penalties of	perjury I, being duly sworn,	, declare that I have read	the foregoin	ig and know the conten	ts thereof and
	rein are true and correct.		, <u>,</u>	·	
Signed this 16	day of <u>September</u>	, 19_98	- -		
•	Coral Point Apa	rtments Operating	11-1	esing, Vice Pres	sident
STATE OF Nebr	aska	e e and	-	÷	
COUNTY OF Doug	las	varior			
On this	16day of	f <u>September</u>		, 19 <u>98</u> ,	
Michael The	esing	, per	sonally app	eared before me,	
who is personally	Imaria ta ma				
<u> </u>	roved on the basis of			-	÷
			· · · · · · · · · · · · · · · · · · ·		
Many (Notary Pub	dic Signature)		IERAL NOTARY-St NANCY F My Comm. Exp	R. TAP	
Nancy R. (Notary's Pr	inted Name)	-		- ₂₂ •	± <u>≠ 25</u>

My Commission Expires: 8/4/99

Seal