

B99000000320
HOLLAND + Knight LLP

File 2nd

Requestor's Name

315 So. Calhoun - S600

Address

TALLA. FL. 224-7000

City/State/Zip

Phone #

32301

Office Use Only

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

1. C. F. Fountain Square G.P., Ltd
(Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

99 AUG 27 AM 11:14
DIVISION OF CORPORATIONS
FLORIDA

☐ Walk in

☐ Pick up time 4:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☒ Certificate of Status

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

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***1793.75 ***1793.75

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

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

RECEIVED
99 AUG 27 AM 10:36
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Examiner's Initials

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG 27 AM 11:15

1. C.F. FOUNTAIN SQUARE G.P., Ltd
(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. TEXAS
(State of Formation)

4. August 20, 1999
(Date of Formation)

5. SANDY WESLEY
(Name of Registered Agent for Service of Process)

6. 333 LAURINA STREET
(Street Address of Registered Office)

JACKSONVILLE Florida 32216
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

Sandy Wesley
(Agent must sign on this line)

8. 3200 South First Street
Austin, Texas 78704
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS STREET ADDRESS

CHARLESTON PARTNERS, INC 57 WELLS AVE, NEWTON, MA 02459

89000004448

10. CHURCHILL FORGE PROPERTIES 57 WELLS AVE, NEWTON, MA 02459
(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 canceled or withdrawn.

CONTINUED

12. C.F. FOUNTAIN SQUARE G.P., Ltd

57 WELLS AVE., NEWTON, MA 02459

(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.

Signed this 24 day of _____, 19____

CHARLESTON PARTNERS, INC. by Todd A. Pelloni President
General Partner

STATE OF South Carolina

COUNTY OF Charleston

On this 8 day of 24, 1999

Todd Abedon personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Lisa A. Pelloni
(Notary Public Signature)

LISA A. PELLONI
(Notary's Printed Name)

Seal

My Commission Expires: 3-5-2005

FILED STATE
DIVISION OF CORPORATIONS
99 AUG 27 AM 11:15

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG 27 AM 11:15

BEFORE ME the undersigned personally appeared TODD G. ABEDON/CHARLESTON PARTNERS
a general partner of C.F. FOUNTAIN SQUARE GP, LTD, a (an) TEXAS
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 0
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 350,000

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.

Signed this 25 day of August, 19 99

for CHARLESTON PARTNERS
General Partner

STATE OF South Carolina

COUNTY OF Charleston

On this 25 day of August, 19 99,

Todd G Abedon, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Lisa A Pelloni
(Notary Public Signature)

LISA A Pelloni
(Notary's Printed Name)

Seal

My Commission Expires: 3-5-2005