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ACCOUNT NO.	:	I2000000195	
REFERENCE	:	599313	4336650

AUTHORIZATION :

COST LIMIT : \$ 35/.00

ORDER DATE : April 4, 2013

ORDER TIME : 2:30 PM

ORDER NO. : 599313-005

CUSTOMER NO: 4336650

AFFIDAVIT FOR FILING

NAME:

DAVENPORT VILLAGE GENERAL

PARTNER LIMITED CORP.

XX AFFIDAVIT BY FOREIGN CORP TO CHANGE/ADD/OFFICERS & OR DIRECTORS.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 52956

EXAMINER'S INITIALS:



TALLANASSIE FLORIDE

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only dur	ing the first calendar year of qualification)
The name of the foreign corporation as it Davenport Village General Part	appears on the records of the Florida Department of State is: ner Limited Corp
number is F1000000569	iness in Florida on 02/02/2010 and its Florida document
3. This corporation was formed under the lar	ws of Guernsey - Channel Islands
4. The name and address of each officer and	/or director is as follows:
<u>Title:</u> D	Name and Address Christopher N. Kemsley
	3 ELM BANK GARDENS
	BARNES, LONDON. UK, UK SW13-ONU
S	James Black
	3 ELM BANK GARDENS
	BARNES, LONDON, UK, UK SW13-ONU
·	
/ (Attach addit	tional pages if necessary)
RSAU	Secretary
Signature of an officer or director	Title of person signing
JAMES BLACK Typed or printed name of person signing	FILING FEE \$35

Make checks payable to Florida Department of State and Mail to: Division of Corporations PO Box 6327*Tallahassee, FL 32314

CR2E127 (8/08)

COVER LETTER

TO:	O: Amendment Section Division of Corporations					
SUBJ	ECT: Davenport Village G	Seneral	Partner Limited Corp			
DOC	MENT NUMBER: F1000000569	ame of Corpora	ration			
The er	.,	•	/Add Officer(s) and/or Director(s) and fee			
Please	return all correspondence concerning th	is matter to th	he following:			
Ме	gan Renze	,	•			
	Name of Contact Person					
Bal	ker & McKenzie LLP					
	Firm/Company		•			
111	l 1 Brickell Avenue, Suit	e 1700				
	Address					
Mia	ami, FL 33131		·			
	City/State and Zip Code		- ,			
me	gan.renze@bakermck	enzie.co	om			
E	-mail address: (to be used for future annual r	eport notificati	tion)			
For fu	rther information concerning this matter.	. please call:				
	_	•	789-8982			
	Name of Contact Person	Arca Code &	789-8982 & Daytime Telephone Number			
Enclo	sed is a check made payable to the Floric	la Departmen	nt of State for the following amount:			
ł	S35.00 Filing Fee S43.75 Filing Fee & Certificate of Status	Centitie	Filing Fee & S52.50 Filing Fee. ded Copy dional copy is sed) S52.50 Filing Fee. Certificate of Status & Certified Copy (Additional copy is enclosed)			
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address: dment Section on of Corporations a Building Executive Center Circle assee, FL 32301			