

OHIO SECRETARY OF STATE
PROCESSING STATEMENT (FORM)
11/1/93

CHARTER NUMBER: FN064148
BILL AND FRAME: 9320-0001

CORPORATION

DOCUMENT NUMBER	CODE	FEE
9312110.01	NFO	10.00

NEW COLUMBIAN ES FUTURE LIMITED PARTNERSHIP

RETURN TO: C T COMMISSION SYSTEM
ATTN R A
17 S HIGH ST
COLUMBUS OH



The State of Ohio

Bob Taft

Secretary of State

FN 64148

Certificate

It is hereby certified that the Secretary of State of Ohio has custody of the Records of Incorporation and Miscellaneous Filings; that said records show the filing and recording of: NFO

of:

SUN COMMUNITIES FINANCE LIMITED PARTNERSHIP

REGISTRANT: SUN COMMUNITIES FINANCE ETC.
ADDRESS: 31700 MIDDLEBELT RD #145
FARMINGTON HILLS MI 48334

STATE OF INCORP: NA

EXPIRATION DATE: 12/01/1998

United States of America
State of Ohio
Office of the Secretary of State

Recorded on Roll 9320 at Frame 0003 of
the Records of Incorporation and Miscellaneous Filings.

Witness my hand and the seal of the Secretary of State at

Columbus, Ohio, this 1ST day of DEC ,

A.D. 19 93 .



Bob Taft
Bob Taft
Secretary of State

Prescribed by
 Bob Taft, Secretary of State
 30 East Broad St., 14th Floor
 Columbus, Ohio 43266-0418
 Form NFO (September 1992)

Approved 12/1/92
 Date 12/1/92
 Fee \$10.00

9312010401

REPORT OF USE OF FICTITIOUS NAME

1. The exact fictitious name being reported is: Sun Communities Finance Limited Partnership

(SEE INSTRUCTION # 1 ON REVERSE)

2. The user of the above name is: (check appropriate box)

- ☐ an individual
- ☐ a General Partnership
- ☒ a Limited Partnership; County in Ohio where certificate or application of limited partnership is filed is Cuyahoga
- ☐ an Ohio corporation, charter no. _____
- ☐ a foreign corporation incorporated in the state of _____ holding Ohio license no. _____
- ☐ an unincorporated association

(NOTE: Ohio has no provision for limited liability companies; if user is a limited liability company, please check this box.)

3. The name of the user designated in item 2 is: Sun Communities Finance Limited Partnership

NOTE: Where the user is a partnership, the name of the partnership must appear on this line. If the registrant is a foreign corporation licensed in Ohio under an assumed name, both the assumed name and actual corporate title of such foreign corporation must appear on this line.

4. The business address of the user is: 31700 Middlebelt Road, Suite 145

(street address)

Farmington Hills

Oakland

County,

Michigan

(City, Village or Township)

(State)

NOTE: P.O. Box addresses are not acceptable.

5. Complete only if user is a partnership:

NAMES OF ALL GENERAL PARTNERS

Sun QRS, Inc.

COMPLETE RESIDENCE ADDRESSES

31700 Middlebelt Rd., Ste 145

Farmington Hills, MI 48334

(NOTE: Pursuant to OAG 89-081, if a general partner is a foreign (out-of-state) corporation, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation licensed in Ohio under an assumed name, please note both the assumed name and the actual corporate title of such general partner.)

6. The nature of business conducted by the user under the fictitious name is:

Ownership and operation of manufactured home communities

This document is signed by a corporate officer, general partner, or association member or officer, or the individual applicant.

By: Gary A. Shiffman

Title: Gary A. Shiffman, President of Sun QRS, Inc.

CT System

December 1, 1993

CT Corporation System
9 South High Street
Columbus, OH 43215
Tel 614 621 1819
Fax 614 621 1906

Secretary of State
Corporation Division
30 East Broad Street, 14th Floor
Columbus, Ohio 43266-0418

RE: SUN COMMUNITIES FINANCE LIMITED PARTNERSHIP
Order #61899

Gentlemen:

On behalf of the above corporation(s), we enclose the document(s) necessary to accomplish the following filing(s), and check(s) to cover the filing fee(s).

- _____ Articles of Incorporation
- _____ Amendment/Amended Articles of Incorporation
- _____ Subsequent Appointment/Change of Address
- _____ Merger Documents/Certificate of Merger
- _____ Certificate of Name Change
- _____ Foreign License Application
- _____ Certificate of Surrender/Dissolution
- XXXX ~~XXXX~~ Fictitious Name Registration

_____ SPECIAL INSTRUCTIONS:

Thank you for your handling of this matter and we would appreciate your sending the usual evidence of filing to the undersigned.

Very truly yours,

Ruth A. Lawrence
Office Manager

Enclosure