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68 EAST MAIN STREET
MOORESTOWN, NEW JERSEY 08057
TELEPHONE: 856-235-5570
FAX: 856-727-0665

March 5, 2001

VIA EXPRESS MAIL

State of Florida
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-03/08/01--01016--005
***1793.75 ***1793.75

RE: Kakatsch Family Limited Partnership #2

Gentlemen/Ladies:

W-1-5525

Enclosed please find an original and one copy of a Certificate of Limited Partnership and an Affidavit of Capital Contributions for Florida Limited Partnership for KAKATSCH FAMILY LIMITED PARTNERSHIP #2, together with a check in the amount of \$1,793.75 covering the filing fee, designation of registered agent and certificate fees. Kindly file the original Certificate of Limited Partnership and return the copy with the filing date stamped thereon in the self-addressed, stamped envelope provided.

Should you have any questions concerning this Certificate, please call me. Thank you.

Very truly yours,

Scott Boyer
SCOTT BOYER

FILED
01 APR -9 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SB:kmh
Enclosures
cc: Mr. John Kakatsch

par/kakatschfile.fl

BP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

March 12, 2001

SCOTT BOYER
JOHN SCOTT BOYER, ATTORNEY AT LAW
68 EAST MAIN STREET
MOORESTOWN, NJ 08057

SUBJECT: KAKATSCH FAMILY LIMITED PARTNERSHIP #2
Ref. Number: W01000005525

We have received your document for KAKATSCH FAMILY LIMITED PARTNERSHIP #2 and your check(s) totaling \$1793.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "Please note that the name as it appears in your letter is not a problem, but the name in line 1 of your form includes the double suffix "LIMITED." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please note that the name as it appears in your letter is not a problem, but the name in line 1 of your form includes the double suffix "LIMITED PARTNERSHIP, L.P."

The registered agent must sign accepting the designation.

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) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 801A00015007

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01 APR -9 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JOHN SCOTT BOYER
ATTORNEY AT LAW
68 EAST MAIN STREET
MOORESTOWN, NEW JERSEY 08057
—
TELEPHONE: 856-235-3570
FAX: 856-727-0665

April 5, 2001

FILED
01 APR -9 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VIA EXPRESS MAIL

State of Florida
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Kakatsch Family Limited Partnership #2

Gentlemen/Ladies:

Enclosed please find an original and one copy of a Certificate of Limited Partnership and an Affidavit of Capital Contributions for Florida Limited Partnership for KAKATSCH FAMILY LIMITED PARTNERSHIP #2, together with a copy of your letter dated March 12, 2001.

Kindly file the original Certificate of Limited Partnership and return the copy with the filing date stamped thereon in the self-addressed, stamped envelope provided. Please note that a check in the amount of \$1,793.75 was previously sent to your office in payment of the filing fee, designation of registered agent fee and certificate fee.

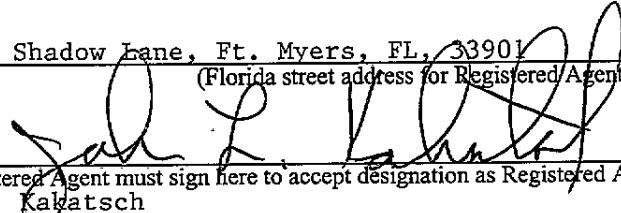
Should you have any questions concerning this Certificate, please call me. Thank you.

Very truly yours,


SCOTT BOYER

SB:kmh
Enclosures
cc: Mr. John Kakatsch

CERTIFICATE OF LIMITED PARTNERSHIP

1. KAKATSCH FAMILY LIMITED PARTNERSHIP #2
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 1364 Shadow Lane, Ft. Myers, FL, 33901
(Business address of Limited Partnership)
3. John L. Kakatsch
(Name of Registered Agent for Service of Process)
4. 1364 Shadow Lane, Ft. Myers, FL, 33901
(Florida street address for Registered Agent)
5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
John L. Kakatsch
6. 1364 Shadow Lane, Ft. Myers, FL, 33901
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 12/31/2025
8. Name(s) of general partner(s): _____ Street address: _____

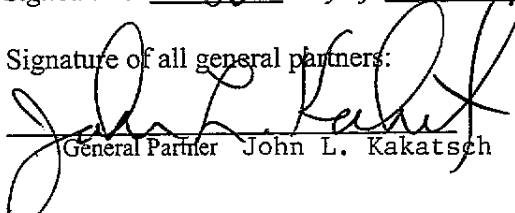
John L. Kakatsch 1364 Shadow Lane, Ft. Myers, FL, 33901

Jean Kakatsch 1364 Shadow Lane, Ft. Myers, FL, 33901

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 30 day of March, 2001

Signature of all general partners:


General Partner John L. Kakatsch

General Partner


General Partner Jean Kakatsch

General Partner

General Partner

General Partner

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

The undersigned constituting all of the general partners of _____

KAKATSCH FAMILY LIMITED PARTNERSHIP #2

a Florida Limited Partnership, certify:

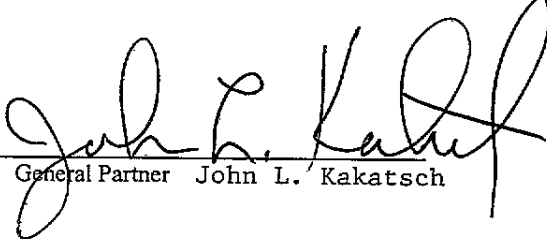
The amount of capital contributions to date of the limited partners is \$ 1,275,000.00

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 1,275,000.00

Signed this 30 day of March, 2001

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the
contents thereof and that the facts stated herein are true and correct.


General Partner John L. Kakatsch

General Partner


General Partner Jean Kakatsch

General Partner

General Partner

General Partner

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TALLAHASSEE FLORIDA