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### FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 24, 2002

CAPITAL CONNECTION

SUBJECT: 6S, L.P.

Ref. Number: W02000035808

RECEIVED

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OVERSIONES SEE PLORIDO

We have received your document for 6S, L.P. and your check(s) totaling \$1477.77. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must add a limited partnership suffix to the name, such as LTD., LIMITED, or LIMITED PARTNERSHIP.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 902A00067336

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RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

### . CAPITAL CONNECTION, INC.

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## OF 6 S, Ltd. A FLORIDA LIMITED PARTNERSHIP

The undersigned General Partner, desiring to form a Limited Partnership pursuant to the Florida Revised Uniform of Partnership Act (1986) hereby states:

- 1. The name of the partnership is: 6 S, Ltd.
- 2. The address of the office of the partnership is: 900 Ohlinger Road, Babson Park, Florida 33827
- 3. The name and address of the agent for service of process is:

Kyle R. Story 900 Ohlinger Road Babson Park, FL 33827

4. The name and business address of the sole General Partner is:

Kyle R. Story 900 Ohlinger Road Babson Park, FL 33827

- 5. The mailing address of the partnership is: P.O. Box 1063, Babson Park, FL 33827
- 6. The latest date upon which the partnership shall dissolve is December 31, 2032.

Execution of this Certificate by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the sole General Partner on behalf of 6 S, L.P., this <u>23rd</u> day of <u>December</u>, 2002.

6 S. Ltd. \_

KYLE PSTORY GENERAL PARTNER

### STATE OF FLORIDA COUNTY OF POLK

	I HEREBY	CERTIFY that on this	23rd	_ of	December	, 2002, before
me, a	n officer duly	qualified to take ackno	wledgme	nts, p	ersonally appear	ed KYLE S. STORY, as
the Ge	eneral Partner	of $6S$ , Ltd $[x]$ who has	produced	d	drivers licens	se
as ide	ntification or	[ ] who is personally kr	own to n	ne, w	ho executed the	oregoing instrument and
ackno	wledged befo	ore me that he executed	l same, f	reely	and voluntarily	for the purposes therein
expre	ssed and who	did not take an oath.				

Brenda J. Kavelak

Notary Public, State of Florida

at Large

(print or type name)

SKENDA J. KAVELAK OTARY PUBLIC - STATE OF FLORID. COMMISSION # DD097412 EXPIRES 05/11/2006 BONDED THEU 1-888-NOTADY

My Commission Expires:

### ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as the statutory registered agent for 6 S, Ltd. a Florida Limited Partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, I hereby agree to act in that capacity and, on behalf of the Partnership, to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

BY:\_\_\_

E,R. STOR

REGISTERED AGENT

Chbjk\CLIENTS\s-t\STORY\6 S CERTIFIC LP.wpd ♥ December 23, 2002

#### AFFIDAVIT OF CAPITAL CONTRIBUTIONS

### STATE OF FLORIDA COUNTY OF POLK

Before me, the undersigned authority personally appeared KYLE R. STORY, as the General Partner of 6 S, Ltd (the "Partnership"), who, being duly sworn, certified as follows:

1. The amount of Capital Contributions to the Partnership made or to be made by the Limited Partners is, in the aggregate, \$196,624.16. At this time, it is not anticipated that additional Capital contributions will be made by the Limited Partners.

Under penalties of perjury, I declare that I have read the foregoing and the facts alleged are true to the best of my knowledge and belief.

December

BY: KYLE R. STORY, GENERAL PARTNER

STATE OF FLORIDA COUNTY OF POLK

DATED this 23rd day of \_\_

I HEREBY CERTIFY that on this 23rd of December , 2002, before me, an officer duly qualified to take acknowledgments, personally appeared KYLE R. STORY, as the General Partner of 6 S, Ltd. [X] who has produced drivers license as identification or [] who is personally known to me, who executed the foregoing instrument and acknowledged before me that he executed same, freely and voluntarily for the purposes therein expressed and who did not take an oath.

Brenda J. Kavelak (print or type name)

Notary Public, State of Florida

at Large

My Commission Expires:

HRENDA J. KAVELAK NOTARY PUBLIC - STATE OF FLORIDA COMMISSION # DD097412 EXPIRES 05/11/2006 BONDED THRU 1-885-NOTARY!

. 2002.