1201 Hays Street
Tallahassee, FL 32301
904-222-8171
800-342-8086

A95000000473

CSC networks
PROTECTING LEGAL & FINANCIAL SERVICES

FILED
95 MAR 27 AM 10:41
SECRETARY OF STATE
CORPORATIONS
DIVISION OF

ACCOUNT NO. : 072100000032

REFERENCE : 566334 12088A

AUTHORIZATION :

COST LIMIT : $ PREPAID

ORDER DATE : March 27, 1995

ORDER TIME : 9:40 AM

ORDER NO. : 566334

CUSTOMER NO: 12088A

CUSTOMER: Thomas F. Kerney, Esq
THOMAS F. KERNEY, ESQ

Suite 210
1516 East Hillcrest Street
Orlando, FL 32803

S00000144815 5
-03/30/95--01008--002
*****35.00 *****35.00

S00000144815 5
-03/30/95--01008--001
*****1750.00 *****1750.00

S. TAX
FILING 1750 W
R. AGENT FEE 35.00
C. COPY
TOTAL 1,785.00
N. BANK
BALANCE DUE

95 MAR 27 AM 10:41
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SECRETARY OF STATE
CORPORATIONS
DIVISION OF

DOMESTIC FILING

NAME: KAKKAR FAMILY PARTNERSHIP, LTD.

XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

3/27/95

CONTACT PERSON: Debbie Skipper

EXAMINER'S INITIALS: BK

CERTIFICATE OF LIMITED PARTNERSHIP

KAKKAR FAMILY PARTNERSHIP, LTD.
(A Florida Limited Partnership)

This Certificate of Limited Partnership, entered into and sworn to this 13th day of March, 1995, by and between KAKKAR MANAGEMENT, INC., a Florida corporation, as General Partner, and SUNIL M. KAKKAR, NITA KAKKAR, SHARAD MEHTA, Trustee of the Sunil M. Kakkar Trust F/B/O Aarti Kakkar Dated March 13, 1995, SHARAD MEHTA, Trustee of the Sunil M. Kakkar Trust F/B/O Amit M. Kakkar Dated March 13, 1995, and SHARAD MEHTA, Trustee of the Sunil M. Kakkar Trust F/B/O Anjali P. Kakkar Dated March 13, 1995 as Limited Partners. It is the intention of the parties that this Certificate create a Limited Partnership which complies with the Florida Revised Uniform Limited Partnership Act (1986).

1. Name of the Partnership. The name of the limited partnership is KAKKAR FAMILY PARTNERSHIP, LTD. (the "Partnership").

2. Character of the Business. The purpose of the Partnership shall be to acquire, improve, manage and lease real and personal property, acquire and manage other business interests, including partnership interests and investment securities, and to carry on such other business as the Partners may from time to time desire.

3. Address for Service of Process and Mailing Address for Partnership. The address of the office of the partnership for service of process and the mailing address of the Partnership shall be 445 W. Oak St., Kissimmee, Florida 34741. The agent for service of process at such address shall be Sunil M. Kakkar.

P95000017055

4. Name and Business Address of the Partners. The General Partner is Kakkar Management, Inc., 445 W. Oak St., Kissimmee, Florida 34741. The Limited Partners are SUNIL M. KAKKAR, 445 W. Oak St., Kissimmee, Florida 34741, NITA KAKKAR, 445 W. Oak St., Kissimmee, Florida 34741, SHARAD MEHTA, Trustee of the Sunil M. Kakkar Trust F/B/O Aarti Kakkar Dated March 13, 1995, 445 W. Oak St., Kissimmee, Florida 34741, SHARAD MEHTA, Trustee of the Sunil M. Kakkar Trust F/B/O Amit M. Kakkar Dated March 13, 1995, 445 W. Oak St., Kissimmee, Florida 34741, and SHARAD MEHTA, Trustee of the Sunil M. Kakkar Trust F/B/O Anjali P. Kakkar Dated March 13, 1995, 445 W. Oak St., Kissimmee, Florida 34741.

5. Term of Partnership. The term of the Partnership shall commence upon filing of this Certificate of Limited Partnership with the Secretary of State of Florida and shall continue until December 31, 2055, unless earlier terminated, liquidated and dissolved.

6. Amount of Cash or Property Contributed by the Partners. The General Partner shall contribute $1,000 to the capital of the Partnership. Sunil M. Kakkar shall contribute $100, Nita Kakkar shall contribute $100, SHARAD MEHTA, Trustee of the Sunil M. Kakkar Trust F/B/O Aarti Kakkar Dated March 13, 1995 shall contribute $100, SHARAD MEHTA, Trustee of the Sunil M. Kakkar Trust F/B/O Amit M. Kakkar Dated March 13, 1995 shall contribute $100, and SHARAD MEHTA, Trustee of the Sunil M. Kakkar Trust F/B/O Anjali P. Kakkar Dated March 13, 1995 shall contribute $100 to the capital of the Partnership.

7. Additional Contributions by Limited Partners. In accordance with the Partnership Agreement, it is anticipated that the Limited Partners will be required to make additional contributions to the Partnership in the total amount of $1,999,500.

GENERAL PARTNER:

KAKKAR MANAGEMENT, INC.

By: Sunil M. Kakkar
Sunil M. Kakkar, President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10:41

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

The undersigned hereby accepts the appointment to serve as the initial registered agent of Kakkar Family Partnership, Ltd.

Sunil M. Kakkar
Sunil M. Kakkar

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF ORANGE

BEFORE ME, the undersigned authority, on this day personally appeared Sunil M. Kakkar, who, upon being duty sworn, deposes and says the total amount of capital contributed and anticipated to be contributed by the Limited Partners to Kakkar Family Partnership, Ltd. is $2,000,000.

FURTHER AFFIANT SAYETH NAUGHT.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10:42

GENERAL PARTNER:

KAKKAR MANAGEMENT, INC.

By: Sunil M. Kakkar
Sunil M. Kakkar, President

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was sworn to and subscribed before me this 13TH day of March, 1995 by SUNIL M. KAKKAR, President of Kakkar Management, Inc. who is personally known to me or who has produced FL DRIVERS LICENSE as identification.

NOTARY PUBLIC
Thomas F. Kerney
THOMAS F. KERNEY
Notary's Printed Name

Notary's Commission Expires:

THOMAS F KERNEY
My Commission CC298092
Expires Jul. 25, 1997
Bonded by HAI
800-422-1555

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 JAN -3 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

KAKKAR FAMILY PARTNERSHIP, LTD.

1a. DOCUMENT # **A95000000473**

mg 1/9 DO NOT WRITE IN THIS SPACE

Mailing Address	Principal Office Address
445 WEST OAK STREET	445 WEST OAK STREET
KISSIMMEE FL 34741	KISSIMMEE FL 34741

If above address(es) are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

2. New Mailing Address, if Applicable
Suite, Apt. #, etc.
City, State & Zip
2a. New Principal Office Address, if Applicable
Suite, Apt. #, etc.
City, State & Zip

3. Date Formed or Registered to Do Business in FLORIDA	3a. Date of Last Report	4. State or Country of Formation
03/27/1995	N/A	FL

5a. Capital Contributions as Shown on Record	5b. Amount of Capital Contributions in FLORIDA to date	6. FEI Number	7. CERTIFICATE OF STATUS REQUIRED
$2,000,000.00	1993512	59-3308866	Applied For / Not Applicable — $8.75 Additional Fee Required for a Certificate of Status

8. **FEES:** 1.) Filing Fee. Computed at a rate of $7 per $1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of $52.50 and a maximum of $437.50
2.) Supplemental Fee $138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN $191.25 ($52.50 + $138.75) AND NO MORE THAN $576.25 ($437.50 + $138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee. **$576.25**
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
KAKKAR, SUNIL M 445 WEST OAK STREET KISSIMMEE FL 34741	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City: FL — Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.102, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
KAKKAR MANAGEMENT, INC.	445 WEST OAK STREET	KISSIMMEE FL 34741	P95000017055

500001668485
-01/10/96--01106--015
****576.25 ****576.25

CR1E003 (6/95)

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath; I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Sunil M. Kakkar DATE 12/28/95

Typed or Printed Name of General Partner Signing Form: SUNIL M. KAKKAR, PRESIDENT Telephone Number: (407) 422-0131

0012993

A95000000473

Kakkar Family Partnership, Ltd.
Requestor's Name

445 West Oak Street
Address

Kissimmee, FL 34741
City/State/Zip Phone #

400000202759 4--110
-12/12/96--01081--012
***1700.00 ***1700.00

Office Use Only

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

1. _____ _____
(Corporation Name) (Document #) 400000202759 4--110
-12/12/96--01081--013
2. _____ *****50.00 *****50.00
(Corporation Name) (Document #)

3. _____ _____
(Corporation Name) (Document #)

4. _____ _____
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____ ☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 11 AM 7:47

	NEW FILINGS
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

	AMENDMENTS
X	Amendment Supplemental affidavit increasing contribution to $4,928,269.00
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

C. TAX _____
FILING 1,750.00
R. AGENT FEE _____
C _____
_____
R _____
DUE _____
REFUND _____

CR2E031(1-95)

Examiner's Initials	

Supplemental Affidavit of Capital Contributions for a Florida Limited Partnership

The undersigned, constituting all of the general partners of Kakkar Family Partnership, Ltd., a Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112, Florida Statutes.

The amount of the capital contributions of the limited partners is $4,928,269.

This _____ day of _____, 1996.

Further affiant sayeth not.

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

General Partner

Sunil M. Kakkar 10/29/96

Sunil M. Kakkar, M.D.
as President of Kakkar Management, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 DEC 11 AM 7:47