

CORPORATE ACCESS INC.
1163-D THOMASVILLE RD
TALLAHASSEE, FL 32303
(904) 222-2866

A96000000508

Address
City/State/Zip Phone #

Albion

Office Use Only

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
96 MAR 15 PM 2:03

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

1. Prince Family Limited Partnership
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

900001750250
-03/19/96--01155--008
***1785.00 ***1785.00

- ☒ Walk in ☒ Pick up time 3/15/96 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

G. TAX FILING 1750.00
R. AGENT FEE 35.00
G. COPY 35.00
TOTAL 1785.00
N. BANK BALANCE DUE 3/15/96
REFUND

96 MAR 15 PM 2:03

Examiner's Initials BK

CERTIFICATE OF LIMITED PARTNERSHIP

The undersigned, desiring to form a limited partnership pursuant to the laws of the State of Florida, certify as follows:

1. Name of Limited Partnership. The name of the Limited Partnership is:

PRINCE FAMILY LIMITED PARTNERSHIP

2. Office for Maintenance of Business Records. The address of the office at which the records of the Limited Partnership will be kept, as required by Section 620.106 of the Florida Statutes, is:

17031 Boca Club Boulevard
Suite 83-B
Boca Raton, Florida 33487

3. Agent for Service of Process. The name and address of the Partnership's agent for service of process in Florida is:

Corporate Access, Inc., a Florida corporation
1116-D Thomasville Road
Mount Vernon Square
Tallahassee, Florida 32303

4. General Partner. The name and business address of the sole General Partner in the Limited Partnership is as follows:

<u>Name</u>	<u>Business Address</u>
MIRIAM T. PRINCE AS TRUSTEE FOR MIRIAM T. PRINCE REVOCABLE TRUST	17031 Boca Club Boulevard Suite 83-B Boca Raton, Florida 33487

5. Address of Partnership. The mailing address of the Limited Partnership is:

17031 Boca Club Boulevard
Suite 83-B
Boca Raton, Florida 33487

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6. Date of Dissolution. The latest date on which the Limited Partnership is to dissolve is ~~February 2,~~ *March* 2026.
7. Effective Date. This certificate will become effective and the Limited Partnership will be formed upon the filing of this Certificate in the Office of the Secretary of State of Florida.

Dated: ~~February 2,~~ *March* 1996.

MIRIAM T. PRINCE AS TRUSTEE FOR
MIRIAM T. PRINCE REVOCABLE TRUST

By: *Miriam T. Prince*
MIRIAM T. PRINCE, Trustee

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned being the sole general partner of the PRINCE FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, certifies as follows:

1. The amount of capital contributions to date of the limited partners is NINE HUNDRED NINETY THOUSAND DOLLARS (\$990,000.00).

2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals NINE HUNDRED NINETY THOUSAND DOLLARS (\$990,000.00).

DATED: February 2, 1996.
March

Under the penalties of perjury, the undersigned declares that it has read the foregoing and that the facts alleged are true to the best of its knowledge and belief.

GENERAL PARTNER:

MIRIAM T. PRINCE AS TRUSTEE FOR
MIRIAM T. PRINCE REVOCABLE TRUST

By: Miriam T. Prince
MIRIAM T. PRINCE, Trustee

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ACCEPTANCE BY REGISTERED AGENT

The undersigned accepts the appointment as registered agent, agrees to act in this capacity and agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and I am familiar with and accept the obligations of its position as registered agent.

CORPORATE ACCESS, INC., a
Florida corporation, Registered Agent

By:

Danny Bennett
Danny Bennett, President

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DIVISION OF CORPORATIONS
96 MAR 15 PM 2:03

A96000000508

CLERK OF STATE
DEPT. OF CORPORATIONS

97 OCT 21 PM 3:21

Prince Family Limited Partnership
(Requestor's Name)
11031 Beech Club Blvd, Ste 250
(Address)
Beech Lake, IL 60348
(City, State, Zip) (Phone #)

OFFICE USE ONLY

200002331842-09
-10/28/97-01081-0003
*****20.00 *****20.00

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<input type="checkbox"/>	Other

Examiner's Initials

10-21



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

07 OCT 21 PM 3:21

September 24, 1997

PRINCE FAMILY LIMITED PARTNERSHIP
17031 BOCA CLUB BLVD., SUITE 83-B
BOCA RATON, FL 33487

SUBJECT: PRINCE FAMILY LIMITED PARTNERSHIP
Ref. Number: A96000000508

We have received your document for PRINCE FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$541.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Attached is a computer printout for the above referenced limited partnership which reflects the total amount contributed and anticipated to be contributed by the limited partners last reported to this office. The amount listed in Block 5a or 8a of the document and the amount last reported to this office must be identical. Please amend Block 5a or 8a accordingly.

The fee to file the supplemental affidavit will be based on the increase at a rate of \$7 per \$1000, with a minimum filing fee of \$52.50 and maximum filing fee of \$1750. The fee to file a supplemental affidavit decreasing the contributions is \$52.50.

The fee to file the supplemental affidavit is \$70.00 and the fee to file the annual report is \$541.25. The total fee due for both filings is \$611.25. Please return the supplemental affidavit and the annual report together with the appropriate fee.

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) 487-6967.

Kenny Manning
Corporate Specialist

Letter Number: 797A00047226

ENCLOSED FOR YOUR REQUEST
IS THE COMPLETED AFFIDAVIT & AN
ADDITIONAL CHECK FOR \$70 IN ADDITION
ENCLOSED TO THE ORIGINAL CHECK
FOR \$541.25.

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



FLORIDA
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 OCT 21 PM 3:21

FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State

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

The undersigned general partners of PRINCE FAMILY LIMITED
PARTNERSHIP, a

Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes

The total amount of the capital contributions of the limited partners is \$ 1,000,000

This 7 day of SEPTEMBER, 19 96

FURTHER AFFIANT SAYETH NOT.

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

General Partner(s)

Miriam J Prince

FEES:

\$7 per \$1,000 based on the additional contributions
(Minimum \$52.50 - Maximum \$1,750.00)