B96000000222

UCC FILING & SEARCH SERVICES INC
(Requestor's Name)

526 EAST PARK AVENUE
(Address)

TALLAHASSEE FL 32301 (904) 681-6528
(City, State, Zip) (Phone #)

700001871407
-06/21/96--01067--009
****140.00 ****140.00

OFFICE USE ONLY

96 JUN 17 PM 3:19

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

1 AMHP-2 LP
(Corporation Name) (Document #)

2
(Corporation Name) (Document #)

3 [illegible]
(Corporation Name) (Document #)

4 File Second
(Corporation Name) (Document #)

C. TAX
FILING 52.50
R. AGENT FEE 35.00
C. CHG 52.50
TOTAL 140.00
N. BANK
BALANCE DUE
REFUND

- [X] Walk In
- [ ] Mail Out
- [ ] Will Wait
- [ ] Photocopy
- [ ] Pick Up Time
- [X] Certified Copy
- [ ] Certificate of Status
- [ ] Certificate of Good Standing
- [ ] ARTICLES ONLY
- [ ] ALL CHARTER DOCS
- [ ] Certificate of FICTITIOUS NAME
- [ ] FICTITIOUS NAME SEARCH
- [ ] CORP SEARCH

6/17/96

	NEW FILINGS
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

	AMENDMENTS
	Amendment
	Resignation of R A, Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/QUALIFICATION
	Foreign
X	Limited Partnership
	Reinstatement
	Trademark
	Other

HOLD FOR PICKUP BY UCC SERVICES

Examiner's Initials	

Florida Department of State, Sandra B. Mortham, Secretary of State

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. AMHW 2, L.P., A California Limited Partnership
(Name of limited partnership as it is in the home state)

2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")

3. California (State of Formation) 4. 6-13-96 (Date of Formation)

5. Nationscorp Registered Agents, Inc.
(Name of Registered Agent for Service of Process)

6. 326 E. Park Avenue
(Street Address of Registered Office)

Tallahassee (City), Florida 32301 (Zip Code)

7. Acceptance by the Registered Agent for Service of Process.

Ed Hand
(Agent must sign on this line)

8. 6 Upper Newport Plaza, Newport Beach, CA 92660
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS	STREET ADDRESS
AMHW CORP., a California Corporation	6 Upper Newport Plaza Newport Beach, CA 92660
F96000013039	

10. 6 Upper Newport Plaza, Newport Beach, CA 92660
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is cancelled or withdrawn.

CONTINUED

12 [illegible], L.P., a California Limited Partnership

6 Upper Newport Plaza, Newport Beach, CA 92660

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This day of 14 . June 19 1996

AMBW CORP., A California Corporation
BY: Paul N. Donnelly, President

General Partner

STATE OF [illegible]

COUNTY OF [illegible]

On this [illegible] day of [illegible], 19 [illegible], [illegible]

personally appeared before me, ☐ who is personally known to me

☐ whose identity I proved on the basis of [illegible]

[illegible]

(Notary Public Signature)

[illegible]

(Notary's Printed Name)

Seal

My Commission Expires: [illegible]

PWR1 ELIZABETH A. ANDERSON Comm # 1063150 NOTARY PUBLIC - CALIFORNIA Orange County My Comm. Expires June 25, 1999 PWR1

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

BEFORE ME, the undersigned personally appeared PAUL [illegible] DONNELLY, PRESIDENT OF [illegible] CORP., A CALIFORNIA CORPORATION, A ___, *a general partner of* [illegible] L.P. ___, *a (an)* CALIFORNIA ___ *limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:*

1. The amount of capital contributions of the limited partners is $ 1,425.00

2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is $ 1,425.00

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 11 day of June, 19 96.

Paul Donnelly

BY: Paul N. Donnelly, President
General Partner

96 JUN 17 PM 3:19

STATE OF CALIFORNIA

COUNTY OF ORANGE

On this [illegible] day of [illegible], 19 [illegible], [illegible]

personally appeared before me, ☒ who is personally known to me

☐ whose identity I proved on the basis of _____

_____

[illegible]
(Notary Public Signature)

_____
(Notary's Printed Name)

Seal

My Commission Expires: _____

ELIZABETH A. ANDERSON
Comm. # 1063150
NOTARY PUBLIC - CALIFORNIA
Orange County
My Comm. Expires June 25, 1999

B96000000222

April 4, 1997

700002195997--4
-04/08/97--01037--002
*****52.50

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

700002195997--4
-04/08/97--01037--002
*****52.50

Attention: Limited Partnership Section

Enclosed please find the "Certificate of Cancellation for AMHP-2, L.P., a California limited partnership", along with the cancellation fee of $52.50.

Please forward an acknowledgment to the person named below. Thanking you in advance for your assistance.

Sincerely,

Catherine Briggs
In-house Counsel

Enclosure

B96-222

Name Availability	
Document Examiner	
Updator	
Updator Verifyer	
Acknowledgment	
W. P. Verifyer	

FILED
97 APR -8 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6 Upper Newport Plaza, Newport Beach, CA 92660
Phone: (714) 252-8350 Fax: (714) 252-0828

CERTIFICATE OF CANCELLATION FOR

AMHP-2, L.P., a California limited partnership
(insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.174, Florida Statutes, this foreign limited partnership hereby submits this certificate of cancellation in order to cancel its registration with the Florida Department of State.

BY: AMHW CORP., a California corporation
its General Partner

By: _____
Paul N. Donnelly, President

STATE OF California

COUNTY OF Orange

On this 1st day of April, 1997, Paul N. Donnelly personally appeared before me,

☒ who is personally known to me
☐ whose identity I proved on the basis of _____

_____
Notary Public Signature

Elizabeth A. Anderson
Notary's Printed Name

Seal

My Commission Expires: 6-25-99

FILED
97 APR -8 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA