

B02000000052

ACCOUNT NO. : 072100000032

REFERENCE : 373965 7122935

AUTHORIZATION :

Patricia Pizote

COST LIMIT : \$ 1785.00

ORDER DATE : February 14, 2002

ORDER TIME : 9:48 AM

ORDER NO. : 373965-020

CUSTOMER NO: 7122935

CUSTOMER: Ms. Robin Gordon
Law Offices Of Michael Lapat
Suite 311
3300 University Drive
Coral Springs, FL 33065

100005021121- 7

FOREIGN FILINGS

NAME: PHOENIX FUND PARTNERS, LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight

EXT# 1156

EXAMINER:

02 FEB 26 AM 10:23

RECEIVED

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 FEB 26 AM 10:38

W2/26

up

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

1. Phoenix Fund Partners, LP
(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. Delaware 4. February 14, 2002
(State of Formation) (Date of Formation)
5. CORPORATION SERVICE COMPANY
(Name of Registered Agent for Service of Process)
6. 1201 HAYS STREET
(Street Address of Registered Office)
- TALLAHASSEE, Florida 32301
(City) (Zip Code)

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

By: Julius M. White
Corporation Service Company
(Agent must sign on this line)

8. 7820 S. Holiday Drive, Suite 321, Sarasota, FL 34231

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS STREET ADDRESS

Phoenix Fund Management, LLC

7820 S. Holiday Drive #321

Sarasota, FL 34231

L02-3783

10. 7820 S. Holiday Drive, Suite 321, Sarasota, FL 34231
(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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 FEB 26 AM 10:38

12. _____

7820 S. Holiday Drive, Suite #321, Sarasota, FL 34231

(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.

Signed this 12th day of February, 2002

Phoenix Fund Management, LLC, GP

BY: _____
General Partner

STATE OF Florida

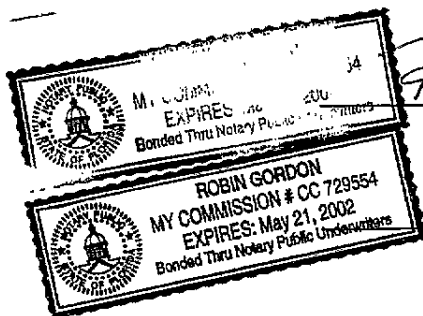
COUNTY OF SARASOTA

On this 12th day of February, 2002

Dean Urick, Managing Member of General Partner _____, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____



Robin Gordon
(Notary Public Signature)

Robin Gordon
(Notary's Printed Name)

Seal

My Commission Expires:

5/21/02

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 FEB 26 AM 10:38

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Dean Urick, Managing Member of Phoenix Fund Mgmt, LLC
a general partner of Phoenix Fund Partners, LP, a ~~(an)~~ (an) Delaware
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 500,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 500,000.

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.

Signed this 12 day of February, 2002.

Phoenix Fund Management, LLC, GP

By: [Signature]

General Partner

STATE OF Florida

COUNTY OF SARASOTA

On this 12TH day of February, 2002.

Dean Urick, Managing Member of General Partner, personally appeared before me.

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 FEB 26 AM 10:38

Elizabeth Leone
(Notary Public Signature)

Elizabeth Leone
(Notary's Printed Name)



Seal

My Commission Expires: 11-13-2004