

CCRS  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE FL 323  
222-1173

FILE 2ND

FILING: GOVERNMENT  
ACCT. # FCA-1

A00000001308

CONTACT: CINDY HICKS

800003367028--4  
-08/22/00--01031--002  
\*\*\*1837.50 \*\*\*1837.50

DATE: 8-22-00

REF. #: 0171.12838

CORP. NAME: LAKE WILSON INVESTMENTS  
PARTNERSHIP, LTD

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT          | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK         | <input type="checkbox"/> FICTITIOUS NAME         |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input checked="" type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                         | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1                          | <input type="checkbox"/> UCC-3                   |
| <input type="checkbox"/> OTHER: _____                |   |  |

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DIVISION OF CORPORATIONS  
0 AUG 22 PM 2:04

STATE FEES PREPAID WITH CHECK # 050596 FOR \$ 1837.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$

PLEASE RETURN:

- ☒ CERTIFIED COPY      ☐ CERTIFICATE OF GOOD STANDING      ☐ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

Examiner's Initials

BK 8/22

RECEIVED  
00 AUG 22 AM 10:20  
STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
LAKE WILSON INVESTMENT PARTNERSHIP, LTD.

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, Sections 620.101 through 620.205 of the Florida Statutes, hereby state the following:

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00 AUG 22  
PM 2:04

1. The name of the Partnership is "Lake Wilson Investment Partnership, Ltd."
2. The address of the Partnership as referred to in Section 620.105, Florida Statutes, is 1734 Hemple Avenue, Gotha, Florida 34734.
3. The name of the agent for service of process on the Partnership shall be Stephen D. Dunegan, Dean Mead Egerton Law Firm, 800 North Magnolia Ave., Suite 1500, Orlando, Florida 32803.
4. The names and business address of the General Partner is:

<u>Name</u>	<u>Address</u>
Lake Wilson Management, LLC 1-00000010056	1734 Hemple Avenue, Gotha, Florida 34734

5. The mailing address for the Partnership is c/o Stephen D. Dunegan, Esquire, Dean, Mead et al., P.O. Box 2346, Orlando, Florida 32802-2346.
6. The latest date upon which the Partnership shall be dissolved is December 31, 2100.
7. A conveyance or encumbrance of real property or any interest therein held in the name of the Partnership, and any other instrument affecting title to real property in which the Partnership has an interest shall be executed in the Partnership name by any one or more of the General Partners.

This Certificate of Limited Partnership was executed by the General Partner this 18th day of August, 2000.

GENERAL PARTNER

LAKE WILSON MANAGEMENT, LLC



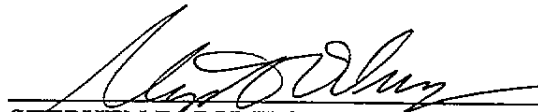
By: Susie Bell Fischer,  
Managing Member

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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for the above-named Partnership, at the place designated in the foregoing Certificate of Limited Partnership, I hereby accept such appointment and agree to act in such capacity, and I further agree to comply with the provisions of all statutes relevant to the proper and complete performance of the duties of a registered agent. I am familiar with, and accept the duties and obligations of, Section 620.192 of the Florida Statutes.

REGISTERED AGENT



STEPHEN D. DUNEGAN

Date: 8/18/02

STATE OF FLORIDA  
COUNTY OF ORANGE

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, personally appeared Susie Bell Fischer, managing member of Lake Wilson Management, LLC, the General Partner of Lake Wilson Investment Partnership, Ltd., a Florida limited partnership (hereinafter referred to as the "Partnership"), of Orange County, Florida, who upon being duly sworn, certified as follows:

1. The amount of the capital contributions to the Partnership made by the limited partners is \$1,343,250.
2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$-0-.

FURTHER AFFLIANT SAITH NOT.

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

GENERAL PARTNER:

Lake Wilson Management, LLC

By: Susie Bell Fischer  
Susie Bell Fischer, Managing Member

Date: 8/18, 2000

Sworn to and subscribed before me this 18<sup>th</sup> day of Aug., 2000, by Susie Bell Fischer, as Managing Member of Lake Wilson Management, LLC. She (check one) ☒ is personally known to me, ☐ produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or ☐ produced other identification, to wit:

NOTARY PUBLIC  
STATE OF FLORIDA  
STEPHEN D. DUNEGAN  
COMMISSION # CC 755663  
EXPIRES 07/14/2003

Stephen D. Dunegan  
Notary Public - State of Florida