



THE UNITED STATES
CORPORATION
COMPANY

AC1000000108

ACCOUNT NO. : 072100000032

REFERENCE : 970731 4732152

AUTHORIZATION :

Patricia Pizato

COST LIMIT : \$ 140.00

FILED
01 JAN 19 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : January 19, 2001

ORDER TIME : 12:04 PM

ORDER NO. : 970731-005

CUSTOMER NO: 4732152

CUSTOMER: Ms. Tristan Hoffman
Gartner Brock & Simon

600003555646--7

Suite 203
1660 Prudential Drive
Jacksonville, FL 32207

DOMESTIC FILING

NAME: PONTE VEDRA AMSOUTH BUILDING,
LTD.

EFFECTIVE DATE:

7

RECEIVED
01 JAN 19 PM 1:19
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP
ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Denise Mick - EXT. 1150

EXAMINER'S INITIALS: _____

Bre 1/19

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
PONTE VEDRA AMSOUTH BUILDING, LTD.**

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

1. The name of the limited partnership is PONTE VEDRA AMSOUTH BUILDING, LTD.

2. The mailing address of the partnership is 601 Riverside Avenue, Building II, Suite 650, Jacksonville, Florida 32204.

3. The name and principal business address of the general partner of the partnership is SKYLINE REALTY SERVICES, INC., a Florida corporation, 601 Riverside Avenue, Building II, Suite 650, Jacksonville, Florida 32204.

4. The term for which the partnership shall exist shall commence on the date hereof and shall continue for thirty (30) years from such date, unless the partnership is sooner dissolved and terminated as provided by law or in the Agreement of Limited Partnership by which the partnership shall be governed.

5. The street address of the registered office for the partnership is 601 Riverside Avenue, Building II, Suite 650, Jacksonville, Florida 32204, and the name of the registered agent for service of process at that address is R. Lamar Shaw, Jr, who is joining in the execution hereof for the purpose of accepting the appointment as registered agent for service of process for the partnership.

IN WITNESS WHEREOF, the undersigned have executed this Certificate this 16th day of January, 2001.

General Partner:

SKYLINE REALTY SERVICES, INC., a
Florida corporation

By: _____

R. Lamar Shaw, Jr., President

Registered Agent:

R. Lamar Shaw, Jr.

FILED
01 JAN 19 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT REGARDING
CAPITAL CONTRIBUTIONS

01 JAN 19
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BEFORE ME, the undersigned authority personally appeared R. LAMAR SHAW, JR., the President of SKYLINE REALTY SERVICES, INC., a Florida corporation, the General Partner of PONTE VEDRA AMSOUTH BUILDING, LTD., a Florida limited partnership, who being first duly sworn, declared as follows:

1. That SKYLINE REALTY SERVICES, INC., is the general partner of PONTE VEDRA AMSOUTH BUILDING, LTD., a Florida corporation.
2. The capital contributions to said limited partnership as of the date hereof totals \$100.00.
3. The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$100.00.
4. This Affidavit is given in compliance with the provisions of Florida Revised Uniform Limited Partnership Act (1986).

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.

SKYLINE REALTY SERVICES, INC., a
Florida corporation

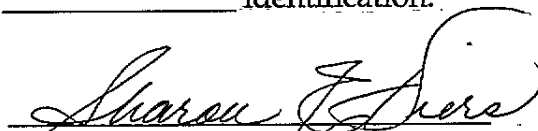
By: 
R. Lamar Shaw, Jr., President

STATE OF FLORIDA
COUNTY OF DUVAL

This foregoing instrument was acknowledged before me this 17th day of January, 2001, by R. Lamar Shaw, Jr., the President of Skyline Realty Services, Inc., the General Partner of Ponte Vedra AmSouth Building, Ltd., on behalf of the partnership, who is either ☒ personally known to me or ☐ has produced _____ identification.



Sharon E. Hiers
Commission # GC 849149
Expires Aug. 13, 2003
Bonded Thru
Atlantic Bonding Co., Inc.


Notary Public, State of Florida, at Large
Print Name: SHARON E. HIERS
My Commission Expires: _____