

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

1(Corporation Name)	(Document #)		-
2(Corporation Name)	(Document #)	600004376 -06/07/01- ****175.00	57569 -01136013) *****87.50
(Corporation Name)	(Document #)		· · · · · · · · · · · · · · · · ·
4(Corporation Name) Walk in Pick up time Mail out Will wait	(Document #)	☐ Certified Copy ☐ Certificate of Sta	atus
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	AMENDMENTS Amendment	drawal <u>UALIFICATION</u>	FILED OI JUN-7 PM 4: 42 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 22, 2001

ASSOCIATES LIMITED PARTNERSHIP 810 J. MEADOWLAND DRIVE NAPLES, FL 34108

SUBJECT: THE END I LIMITED PARTNERSHIP

Ref. Number: W01000009900

We have received your document for THE END I LIMITED PARTNERSHIP and check(s) totaling \$175.00. However, your check(s) and document are being returned for the following:

You failed to make the correction(s) requested in our previous letter.

The document must contain both the street address of the principal office and the mailing address of the entity.

The filing fee is \$87.50, please submit a check in that amount. Also, you must specifically state the mailing address of the Limited Partnership.

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.

Michelle Hodges Document Specialist

Letter Number: 301A00031272

Certificate of Limited Partnership

- NAME OF PARTNERSHIP: THE END I LIMITED PARTNERSHIP
- 2. GENERAL CHARACTER AND NATURE OF PARTNERSHIP BUSINESS:

To engage in the business of investing in, purchasing, acquiring, owning, managing, selling, exchanging, and otherwise engaging in securities and related activities of every kind and nature.

ADDRESS OF THE OFFICE OF PARTNERSHIP IN THE STATE OF FLORIDA:

BUSINESS ADDRESS AND MAINING ADDRESS BRE ONE IN THE SAME)

THE END I LIMITED PARTNERSHIP

Jayson L. Howard and Lisa A. McManus, General Partners

1555 Nautilus Road

Naples, FL 34102

NAME AND ADDRESS OF AGENT FOR SERVICE OF PROCESS:

* THE BUSINESS ADDRESS AND MAINING ADDRESS ARE

Business Address: ONE AND THE SAME Jayson L. Howard

1555 Nautilus Road

Naples, FL 34102

THE NAME(S) AND BUSINESS AND RESIDENTIAL ADDRESS(ES) FOR EACH GENERAL PARTNER:

(business and residential address are one and the same)

Jayson L. Howard

1555 Nautilus Road Naples, FL 34102

Lisa A. McManus 1555 Nautilus Road Naples, FL 34102

THE LATEST DATE UPON WHICH THE LIMITED PARTNERSHIP IS TO DISSOLVE:

December 31, 2030

ANY OTHER MATTERS THE PARTNERS MAY DETERMINE TO INCLUDE HEREIN:

EXECUTED this 20 day of April , 2000 by the general partners.

I hereby accept appointment as Agent for Service for the above Limited Partnership.

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FLORIDA LIMITED PARTNERSHIP

The undersigned constituting all of the general partners of	
THE ENDI LIMITED PARTNERSHIP	
a Florida Limited Partnership, certify:	
·	
The amount of capital contributions to date of the limited partners is \$	
The total amount contributed and anticipated to be contributed by the limited partners at this time	
totals \$	
Signed this ZOY day of April , 19 ZOO1. FOR ESTATE PURPOSES ONLY. FURTHER AFFIANT SAYETH NOT.	.2 - 4
Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.	
General Partner General Partner General Partner	
General Partner	,
General Partner General Partner	- Aries