

Capitol Service

1406 Hays Street, Suite

Tallahassee, FL 32301

(850) 878-4734  
Kathi or Brent

**A02000000046**

Office Use Only

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

1. IPSC, Ltd.  
(Corporation Name)

(Document #)

2. \_\_\_\_\_  
(Corporation Name)

(Document #)

3. \_\_\_\_\_  
(Corporation Name)

(Document #)

4. \_\_\_\_\_  
(Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time 19

☒ Certified Copy

☐ Mail Out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

**NEW FILINGS**

☐ Profit

☐ Not for Profit

☐ 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

**REGISTRATION/QUALIFICATION**

☐ Foreign

☒ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

Examiner's Initials

FILED  
02 JAN 9  
AM 11:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
02 JAN -9 AM 11:13  
DIVISION OF CORPORATION

500004761825--6  
-01/09/02--01023--019  
\*\*\*\*295.00 \*\*\*\*140.00

FILED  
02 JAN -9 AM 11:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

January 9, 2002

*Please back later*

CAPITOL SERVICES, INC.

TALLAHASSEE, FL

SUBJECT: IPSC, LTD.

Ref. Number: W02000000726

We have received your document for IPSC, LTD. and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$140.00 payment.,

The limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

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) 245-6914.

Buck Kohr  
Corporate Specialist

Letter Number: 602A00001291

*Resubmit*

FILED  
JAN 11 11:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
JAN - 9  
JAN 11 11:35  
FILED  
JAN 11 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

***IPSC ASSOCIATES, L.L.C.***

**TO:** Kathy Hill  
Capitol Services

**FAX:** 800-226-7544

**FROM:** Victor L. Stosik, Esq.

**DATE:** January 10, 2002

**RE:** IPSC, Ltd.

**PAGES:** 1

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02 JAN -9 AM 11:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

With reference to the formation of IPSC Associates, L.L.C., a Florida limited liability company, please be advised that the proposed Florida limited partnership, IPSC Associates, Ltd., is a member of said limited liability company.

*Vic Stosik*

CERTIFICATE OF LIMITED PARTNERSHIP

OF ~~Associates~~  
IPSC/LTD.

02 JAN -9 AM 11:35  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned General Partner, desiring to form a limited partnership pursuant to Section 620.108 of the Florida Statutes, does hereby certify and swear to the following:

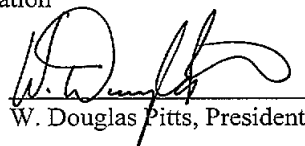
1. The name of the limited partnership is IPSC/~~Associates~~ LTD.
2. The location of the principal place of business of the limited partnership is 701 Brickell Avenue, Suite 1400, Miami, Florida 33131-2822.
3. The name of the agent for service of process on the limited partnership required to be maintained pursuant to the provisions of Section 620.105 of the Florida Statutes is W. Douglas Pitts, whose address is 701 Brickell Avenue, Suite 1400, Miami, Florida 33131-2822.
4. The name and business address of the general partner is NEWCASTER DEVCORP, INC., a Florida corporation, 701 Brickell Avenue, Suite 1400, Miami, Florida 33131-2822.   
P96006034735
5. The mailing address for IPSC/~~Associates~~ LTD., is 701 Brickell Avenue, Suite 1400, Miami, Florida 33131-2822.
6. The latest date upon which the limited partnership is to dissolve is December 31, 2066, unless otherwise agreed in writing by the partners.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed on behalf of the General Partner of IPSC, LTD., this 8 day of January, 2002.

GENERAL PARTNER:

NEWCASTER DEVCORP, INC., a Florida corporation

By:

  
W. Douglas Pitts, President

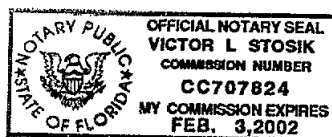
STATE OF FLORIDA     )  
                                  ) SS:  
COUNTY OF MIAMI-DADE    )

BEFORE ME, personally appeared W. Douglas Pitts, known to me to be President of NEWCASTER DEVCORP, INC., a Florida corporation, the General Partner of IPSC/~~Associates~~ LTD., in the foregoing instrument, and known to me to be the person who executed the same, and he acknowledged before me that said instrument is his act and deed and that he executed the same for the purposes therein expressed in the capacities stated herein. He is personally known to me and did/did not take an oath.

WITNESS my hand and official seal in the State and County aforesaid this 8<sup>th</sup> day of January, 2002.

  
Name: \_\_\_\_\_  
Notary Public, State of Florida

My Commission Expires:



**LIMITED PARTNERSHIP REGISTERED AGENT DESIGNATION**

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHO PROCESS MAY BE SERVED.

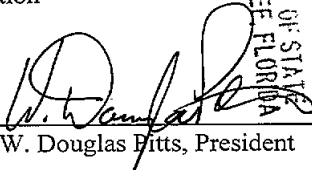
IN COMPLIANCE WITH SECTION 620.105(2), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

<sup>Associates</sup>  
IPSC/LTD., with its principal place of business at 701 Brickell Avenue, Suite 1400, Miami, Florida 33131-2822, has named W. Douglas Pitts, located at 701 Brickell Avenue, Suite 1400, Miami, State of Florida, as its Agent to accept service of process within Florida.

**GENERAL PARTNER:**

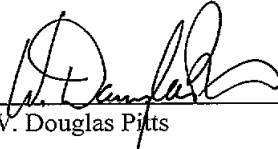
NEWCASTER DEVCORP, INC., a Florida corporation

By:

  
W. Douglas Pitts, President

Date: January 8, 2002

Having been named to accept service of process as statutory registered agent for the above stated limited partnership, at the place designated in this certificate, I hereby agree to act in that capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 620.192 Florida Statutes.

  
W. Douglas Pitts

Date: January 8, 2002

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

02 JAN -9 AM 11:35  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STATE OF FLORIDA            )  
  ) SS:  
COUNTY OF MIAMI-DADE    )

BEFORE ME, the undersigned authority, personally appeared W. Douglas Pitts, the President of NEWCASTER DEVCORP, INC., a Florida corporation, and the general partner of IPSC/LTD., a Florida limited partnership, hereinafter referred to as the "Partnership", who, upon being duly sworn, certified as follows:

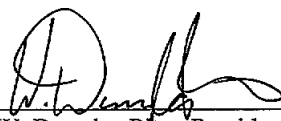
1. The amount of the initial capital contributions made by the limited partners to the Partnership is, in the aggregate, \$1,000.00.

2. At this time, the anticipated amount of the capital contributions to be made by the limited partners to the Partnership is, in the aggregate, \$6,250.00.

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:**


NEWCASTER DEVCORP, INC., a Florida corporation

By:   
W. Douglas Pitts, President

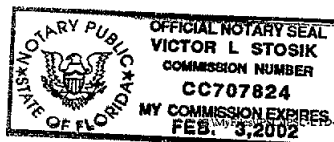
Date: January 8, 2002  
Miami, Florida

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared W. Douglas Pitts, as President of Newcaster Devcorp, Inc., a Florida corporation and the general partner of IPSC/LTD., known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as the President of the General Partner of said Partnership. He is personally known to me and did take an oath.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 8th day of January, 2002.

  
Name: \_\_\_\_\_  
Notary Public, State of Florida

My Commission Expires:



CC,wpd - 1/8/02