

ACCOUNT NO. : 07210000032

REFERENCE: 765899 4326591

AUTHORIZATION:

COST LIMIT : \$ PREPAID

ORDER DATE: October 1, 2002

ORDER TIME: 10:13 AM

ORDER NO. : 765899-005

CUSTOMER NO: 4326591

CUSTOMER: Sheri D. Cerreta, Legal Asst

Fowler White Boggs Banker P.a.

Suite 1700

501 East Kennedy Boulevard

Tampa, FL 33602

DOMESTIC FILING

NAME:

CYE, LTD.

## EFFECTIVE DATE:

ARTICLES OF INCORPORATION 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: Heather Powell - EXT. 1155 EXAMINER'S INITIALS:

\*\*\*1837.50 S\*\*\*LS3



## CERTIFICATE OF LIMITED PARTNERSHIP CYE, LTD.

In accordance with Florida Statute Section 620.108, this Certificate of Limited Partnership shall be filed with the Department of State of Florida, setting forth the following:

- The name of this limited Partnership shall be "CYE, Ltd."
- Registered Agent and Address. The office and the name of the agent for service of process required to be maintained is as follows:

Patricia C. Turrell 2204 Green Oaks Lane Tampa, Florida 33612

The name and business address of each 3. General Partner. general partner is:

> Robbie Sue Conner 2204 Green Oaks Lane Tampa, Florida 33612

Patricia C. Turrell 2204 Green Oaks Lane Tampa, Florida 33612

Sandra C. Graves

2204 Green Oaks Lane Tampa, Florida 33612

4. Mailing Address. The principal office and mailing addre of the limited partnership is:

> 2204 Green Oaks Lane Tampa, Florida 33612

5. <u>Termination Date</u>. The latest date upon which the limited partnership is to dissolve is December 31, 2052.

Robbie Sue Conner.

Robbie Sue Conner.

Patricia C. Turrell, General Partner and Registered Agent

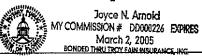
Sandra C. Graves, General Partner

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 36 day of, 2002, by ROBBIE SUE CONNER, who is personal known to me.or who has produced	ly as
identification.  Juge n. Musel	_
Print Name	<b>–</b> .

"NOTARY PUBLIC"

My Commission Expires:



FILED

02 OCT -1 PM 1: 16

SECRETARY OF STATE

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

day of <u>fof.</u> , personally known to me or as identification.	ent was acknowledged before me this 30 kg 2002, by PATRICIA C. TURRELL, who is who has produced N/A  Print Name
	My Commission Expires:  Joyce N. Arnold  My COMMISSION # DD000226 EXPIRES  Morch 2, 2005  BONDED THRU TROY FAIN INSURANCE, INC.
day of, 2002,	ent was acknowledged before me this 30 kg by SANDRA C. GRAVES, who is personally as produced NA as  Print Name
	"NOTARY PUBLIC"  My Commaission Expires:     Joyce N. Amold     MYCOMMISSION # DD000226 EXPIRES     Morch 2, 2005     BONDED THRU TROY FAIN INSURANCE, INC.
AMC\docs\474	PPROVED AND FILED FILED ANY OF STATE ASSEE, FLORIDA

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, THE UNDERSIGNED AUTHORITY, personally appeared ROBBIE SUE CONNER, PATRICIA C. TURRELL and SANDRA C. GRAVES, known to me to be the general partners of CYE, LTD., a Florida limited partnership, who, before me first duly sworn, declare as follows:

- 1. The amount of capital initially contributed to the Partnership by the limited partners is \$1,980.00.
- 2. The limited partners presently anticipate contributing additional funds to the Partnership; and the total amount contributed and anticipated to be contributed is \$10,000,000.00.

Robbie Sue Conner

Robbie Sue Conner, General Partner

Latricia C Jerrell

Patricia C. Turrell, General Partner

Dandra C. Branes

Sandra C. Graves, General Partner

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02 OCT - I PM I: 16

SECRETARY OF STATE

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

The foregoing instrument	was acknowledged before me this 30	<u>M</u>
of <u>lept.</u> , 2002, by ROBB:	IE SUE CONNER, who is personally know	<b>v</b> n
to me or who has produced	N/A as identification	ł.
	Juge D. aund	<u>.</u>
	Print Name	
	"NOTARY PUBLIC"	
	My Commission Expires:	···· <u>·</u> ·
	Joyce N. Arnold  MY COMMISSION # DD000226 EXPIRES  March 2, 2095  BONDED THRUTROY FAIN INSURANCE INC	
STATE OF FLORIDA COUNTY OF HILLSBOROUGH	-	
()	was acknowledged before me this <u>30</u> TRICIA C. TURRELL, who is personall	
known to me. or who has	produced N/A	ıs
i <del>dentification</del> .		
	Print Name	<u>.                                    </u>
	"NOTARY PUBLIC"	02 00
	My Commission Expires:  Joyce N. Arnold  MY COMMISSION # DD000226 EXPIRES  March 2, 2005  BONDED THRU TROY FARM INSURANCE INC	FILET
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STATE OF FLORIDA COUNTY OF HILLSBOROUGH

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				My Commis	sion Exp	oires:		
						Joyce N. Arnold /ISSION # DD000226 March 2, 2005		

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