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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

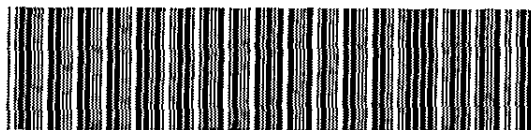
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN MAY 20 2003

LAW OFFICES  
**SCRUGGS & CARMICHAEL, P.A.**

DOWNTOWN OFFICE:

ONE S.E. FIRST AVENUE 32601  
POST OFFICE BOX 23109 32602  
GAINESVILLE, FLORIDA  
TELEPHONE (352) 376-5242  
FAX (352) 375-0690

WEST OFFICE:

METROCORP CENTER  
4041 N.W. 37TH PLACE  
SUITE B  
GAINESVILLE, FLORIDA 32608  
TELEPHONE (352) 374-4120  
FAX (352) 378-9326

☐ REPLY  
DOWNTOWN

☒ REPLY  
WEST OFFICE

Email: [littell@scruggs-carmichael.com](mailto:littell@scruggs-carmichael.com)  
West Palm Beach: (561) 833-6564

SIGSBEE L. SCRUGGS  
1898-1983  
PARKS M. CARMICHAEL  
1909-1994  
WILLIAM D. PRIDGEON  
1933-1980  
MICHELLE VAUGHNS  
1946-1982

RETIRED  
RAY D. HELPLING  
WILLIAM N. LONG  
WILLIAM C. ANDREWS

JAMES G. LANCHE, JR.  
JOHN F. ROSCOW III  
STAN CUSHMAN†  
FRANK P. SAIER  
PHILIP A. DELANEY  
MITZI COCKRELL AUSTIN†  
JOHN G. STINSON  
KEVIN DALY  
RAYMOND M. IVEY  
MARY DAY COKER†  
JEFFREY R. DOLLINGER  
JEFFERSON M. BRASWELL  
KEVIN D. JURECKO  
JOHN F. ROSCOW IV  
ELIZABETH A. MARTIN  
†CERTIFIED FAMILY MEDIATOR  
‡CERTIFIED CIVIL MEDIATOR

May 14, 2003

Secretary of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

*Re: Ewing Waterproofing Systems Labor, Ltd.*

Dear Sir or Madam:

I am enclosing the following documents to form the partnership named above:

1. Certificate of Limited Partnership;
2. Affidavit of Capital Contributions for Florida Limited Partnership;
3. Partnership Registration Statement; and
4. Check for \$96.25.

Please return a certificate under seal to me in the stamped envelope provided to:

Charles W. Littell  
Scruggs & Carmichael, P.A.  
4041 NW 37th Place, Suite B  
Gainesville, Florida 32606

Very truly yours,

SCRUGGS & CARMICHAEL, PA

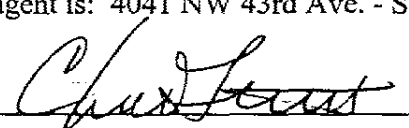
By:

  
Charles W. Littell

CWL:cp  
Enclosures

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TALLAHASSEE, FLORIDA

## CERTIFICATE OF LIMITED PARTNERSHIP

1. The name of the partnership is: **Ewing Waterproofing Systems Labor, Ltd.**
2. The business address of the partnership is: 1315 NW 4<sup>th</sup> Place, Gainesville, FL 32603.
3. The name of the registered agent for service of process is: Charles W. Littell.
4. The address of the registered agent is: 4041 NW 43rd Ave. - Suite B, Gainesville, FL 32606.
5. Signature of registered agent: 
6. The mailing address of the Limited Partnership is: 1315 NW 4<sup>th</sup> Place, Gainesville, FL 32603.
7. The latest date on which the Limited Partnership is to be dissolved is December 31, 2028.
8. The name and address of the general partner are:

EWS Partners, Inc.  
#P03000051418

1315 NW 4<sup>th</sup> Place, Gainesville, FL 32603

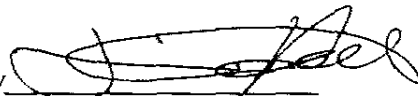
*Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true, to the best of my knowledge and belief.*

Signed this 13 day of May, 2003.

Signature of all general partners:

EWS Partners, Inc.

by

  
Irwin Hall, President

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TALLAHASSEE, FLORIDA

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS  
FOR FLORIDA LIMITED PARTNERSHIP**

*The undersigned constituting all of the general partners of Ewing Waterproofing Systems Labor, Ltd., a Florida Limited Partnership, certify:*

The amount of capital contributions to date of the limited partners is \$7,500.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$7,500.00.

Signed this 13<sup>th</sup> day of May, 2003.

FURTHER AFFLIANT SAYETH NOT.

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

General Partner:

EWS Partners, Inc.

by   
Irwin Hall, President

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