A04000000866

LArry Wolfe (Requestor's Name)
7(Requestor's Name) 200-a John Knox Rd (Address)
Tallaharree FZ 32303
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
Westwino Apartments, LTD (Business Entity Name)
(Document Number)
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SECRETARY OF STATE
TALLAHISTEL FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP

1. WESTWIND APARTMEN (Name of Limited Partnership: must contain a suffix such a	75 LTD.
2. 200- Q John Knon (Business address of Limite	
3. LARRY S. WOLF. (Name of Registered Agent for S	Service of Process)
4. ZOO-Q John Knox Rd (Florida street address for Ro	
5. (Registered Apolit Intist sign here to accept designation a	
6. 200-Q John Knoy Rd 7. (Mailing Address of the Limi	,
7. The latest date upon which the Limited Partnershi 8. Name(s) of general partner(s): Larry S. Wolfe.	p is to be dissolved is: 12/31/2030 Street address: 200-A John Knox Rd TALLAVASICE FL 32303
	AUAVASICE E 32303
Under penalties of perjury I (we) declare that I (we) contents thereof and that the facts stated herein are to Signed this 26 TH day of MAY	
Signature of all general partners:	PN 3: STATE General Partner General Partner
General Partner	General Partner
General Partner	General Partner

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FLORIDA LIMITED PARTNERSHIP

The undersigned constituting all of the general partners of WESTWIND APARTMENTS, LTD.		
a Florida Limited Partnership, certify:		
The amount of capital contributions to date	of the limited partners is \$ 900.00.	
The total amount contributed and anticipate totals \$ 900°.	ed to be contributed by the limited partners at this time	
Signed this 2673 day of May	. 2004.	
FURTHER AFFIANT SAYETH NOT.		
Under the penalties of perjury I (we) declar contents thereof and that the facts stated he	re that I (we) have read the foregoing and know the erein are true and correct.	
Jan Srlye		
General Partner	General Partner	
General Partner	General Partner	
General Partner	General Partner	