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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

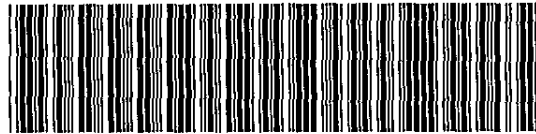
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DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Knowles Properties, Ltd.

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- ☐ Art of Inc. File _____
- ☒ LTD Partnership File _____
- ☐ Foreign Corp. File _____
- ☐ L.C. File _____
- ☐ Fictitious Name File _____
- ☐ Trade/Service Mark _____
- ☐ Merger File _____
- ☐ Art. of Amend. File _____
- ☐ RA Resignation _____
- ☐ Dissolution / Withdrawal _____
- ☐ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- ☐ Photo Copy _____
- ☐ Certificate of Good Standing _____
- ☐ Certificate of Status _____
- ☐ Certificate of Fictitious Name _____
- ☐ Corp Record Search _____
- ☐ Officer Search _____
- ☐ Fictitious Search _____
- ☐ Fictitious Owner Search _____
- ☐ Vehicle Search _____
- ☐ Driving Record _____
- ☐ UCC 1 or 3 File _____
- ☐ UCC 11 Search _____
- ☐ UCC 11 Retrieval _____
- ☐ Courier _____

Signature _____

Requested by: *WC*

Name

Date *10/4*

Time *11:00*

Walk-In _____

Will Pick Up _____

**CERTIFICATE OF LIMITED PARTNERSHIP
OF KNOWLES PROPERTIES, LTD.**

04 OCT -4 PM 4:20
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned General Partner desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Section 620.108 of the Florida Statutes, hereby state the following:

1. The name of the partnership is **KNOWLES PROPERTIES, LTD.**
2. The address of the office of the partnership is **950 Grand Canal Street, Gulf Breeze, Florida 32563.**
3. The name and address of the agent for service of process on the partnership is:

MARK D. KNOWLES
950 Grand Canal Street
Gulf Breeze, Florida 32563
4. The name and business address of the General Partner is as follows:

KNOWLES MANAGEMENT, L.L.C.
c/o Mark D. Knowles
950 Grand Canal Street
Gulf Breeze, Florida 32563
5. The mailing address of the partnership is 950 Grand Canal Street, Gulf Breeze, Florida 32563.
6. The latest date upon which the partnership shall dissolve is December 31, 2054.

This Certificate of Limited Partnership has been executed by the General Partner, this 21st day of August, 2004.

KNOWLES MANAGEMENT, L.L.C., a
Florida Limited Liability Company

By: Mark D. Knowles
Mark D. Knowles, Its Manager

By: Sheila R. Knowles
Sheila R. Knowles, Its Manager

As the GENERAL PARTNER of KNOWLES
PROPERTIES, LTD

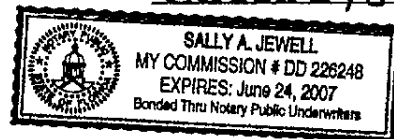
STATE OF FLORIDA
COUNTY OF Santa Rosa

Before the subscriber, a Notary Public, personally appeared **MARK D. KNOWLES**, who is personally known to me and who is described by the said name in and who executed the foregoing instrument, and to be a Manager of **KNOWLES MANAGEMENT, L.L.C.**, and who acknowledged and declared that he, as such officer of said limited liability company, and being duly authorized by it, signed its name and affixed its seal to and executed the said instrument for it and as its act and deed for the uses and purposes therein set forth.

GIVEN under my hand and official seal this 21st day of August, 2004.

(Notary Seal)

Sally A. Jewell
NOTARY PUBLIC
Typed Name: SALLY A. Jewell
Commission Expires: 6-24-07
Commission No.: DD226248



STATE OF FLORIDA
COUNTY OF Santa Rosa

Before the subscriber, a Notary Public, personally appeared **SHEILA R. KNOWLES**, who is personally known to me and who is described by the said name in and who executed the foregoing instrument, and to be a Manager of **KNOWLES MANAGEMENT, L.L.C.**, and who acknowledged and declared that she, as such officer of said limited liability company, and being duly authorized by it, signed its name and affixed its seal to and executed the said instrument for it and as its act and deed for the uses and purposes therein set forth.

GIVEN under my hand and official seal this 21st day of August, 2004.

(Notary Seal)

Sally A. Jewell
NOTARY PUBLIC
Typed Name: SALLY A. Jewell
Commission Expires: 6-24-07
Commission No.: DD226248



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AFFIDAVIT OF KNOWLES PROPERTIES, LTD.

Before me, the undersigned, the General Partner of **KNOWLES PROPERTIES, LTD.**, a Florida Limited Partnership, certifies as follows:

The amount of capital contributions to date of the Limited Partners is **\$1,000.00**.

The total amount anticipated to be contributed by the Limited Partners at this time totals **\$5,000,000.00**.

Further affiant sayeth not.

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.

KNOWLES MANAGEMENT, L.L.C., a
Florida Limited Liability Company

By: Mark D. Knowles
Mark D. Knowles, Its Manager

By: Sheila R. Knowles
Sheila R. Knowles, Its Manager
As the GENERAL PARTNER of KNOWLES
PROPERTIES, LTD

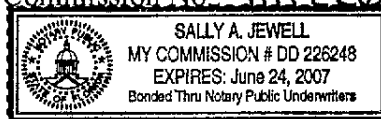
STATE OF FLORIDA
COUNTY OF Santa Rosa

Before the subscriber, a Notary Public, personally appeared **MARK D. KNOWLES**, who is personally known to me and who is described by the said name in and who executed the foregoing instrument, and to be a Manager of **KNOWLES MANAGEMENT, L.L.C.**, and who acknowledged and declared that he, as such officer of said limited liability company, and being duly authorized by it, signed its name and affixed its seal to and executed the said instrument for it and as its act and deed for the uses and purposes therein set forth.

GIVEN under my hand and official seal this 21st day of August, 2004.

(Notary Seal)

Sally A. Jewell
NOTARY PUBLIC
Typed Name: SALLY A. Jewell
Commission Expires: 6-24-07
Commission No.: DD 226248



STATE OF FLORIDA
COUNTY OF Santa Rosa

Before the subscriber, a Notary Public, personally appeared **SHEILA R. KNOWLES**, who is personally known to me and who is described by the said name in and who executed the foregoing instrument, and to be a Manager of **KNOWLES MANAGEMENT, L.L.C.**, and who acknowledged and declared that she, as such officer of said limited liability company, and being duly authorized by it, signed its name and affixed its seal to and executed the said instrument for it and as its act and deed for the uses and purposes therein set forth.

GIVEN under my hand and official seal this 21st day of August, 2004.

Sally A. Jewell

NOTARY PUBLIC

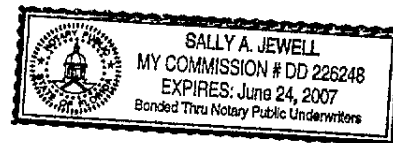
Typed Name: SALLY A. Jewell

Commission Expires: 6-24-07

Commission No.: DD226248

(Notary Seal)

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**CERTIFICATE DESIGNATING ADDRESS FOR
SERVICE OF PROCESS WITHIN FLORIDA
AND DESIGNATING AGENT UPON WHOM
PROCESS MAY BE SERVED**

In compliance with Chapter 620 (Sections 620.101-200.192) of the Florida Statutes, the following is submitted:

FIRST: **KNOWLES PROPERTIES, LTD.**, desiring to organize under the Laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, at the City of Gulf Breeze, County of Santa Rosa, State of Florida, has named **MARK D. KNOWLES**, located at **950 Grand Canal Street, Gulf Breeze, Florida 32563**, the registered office of the Partnership, as its agent to accept service of process within this State.


ACCEPTANCE OF AGENT

Having been named to accept service of process and serve as Registered Agent for the above-named family limited partnership, at the place designated in this Certificate, I hereby agree to act in this capacity and agree to comply with the provisions of said statute relative to keeping said office open.


MARK D. KNOWLES

STATE OF FLORIDA
COUNTY OF Santa Rosa

The foregoing instrument was acknowledged before me this 21st day of August, 2004, by MARK D. KNOWLES, who is (☒) personally known to me or () provided _____ as identification.


NOTARY PUBLIC
Typed Name: SALLY A. Jewell
Commission Expires: 6-24-07
Commission No.: DD 226248

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