Corporation Information
Services, Inc.
1201 Hays Street
Tallahassee, FL 32301
904-222-9171
904-222-0393 FAX

800-342-8036

CSC networks

A95000000445

Mail To:
P.O. Box 5028
Tallahassee, FL 32314

ACCOUNT NO. : 072100000032

500001437545
-03/23/95--01032--008
****157.50 ****157.50

REFERENCE : 562012 80329A

AUTHORIZATION :

COST LIMIT : $ PREPAID

ORDER DATE : March 17, 1995

ORDER TIME : 9:47 AM

ORDER NO. : 562012

CUSTOMER NO: 80329A

CUSTOMER: Charles S. Isler, III, Esq
ISLER & BANKS, PA

434 Magnolia Avenue

Panama City, FL 32401

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 17 AM 9:39

RECEIVED
95 MAR 17 AM 10:14
DIVISION OF CORPORATION

DOMESTIC FILING

NAME: ARCH LIMITED
P

TAX	
FILING	70.00
R. AGENT FEE	35.00
S. COPY	52.50
TOTAL	157.50
N. BANK	
BALANCE DUE	

_____ ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

3/17/95

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS: BK

CHARLES S. ISLER, III, P.A.

ATTORNEY AND COUNSELOR AT LAW
434 MAGNOLIA AVENUE
POST OFFICE DRAWER 430
PANAMA CITY, FLORIDA 32402

CHARLES S. ISLER, III
SHERI L. ALLAN
JULIE ANN SOMBATHY

TELEPHONE (904) 769-5532
FACSIMILE (904) 785-5852

March 16, 1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 17 AM 9:39

Florida Department of State
Division of Corporations
Tallahassee, FL 32314

Attn: New Filings

Re: ARCH Limited

Dear Sir or Madam:

Enclosed herewith you will find the original and one copy of the Certificate of Limited Partnership of Arch Limited, an Affidavit of Capital Contributions, and as well as a check in the sum of $157.50 for your fee. After filing is complete please provide to Corporation Information Services to be forwarded to my office.

If you have any questions, please do not hesitate to contac me.

Sincerely yours,

Julie Ann Sombathy

JAS/mlr/F-4783

Encl. as stated

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 17 AM 9:

CERTIFICATE OF LIMITED PARTNERSHIP

OF

ARCH-P **LIMITED**

1. Name of Limited Partnership: ARCH-P Limited.

2. Business Address of Limited Partnership: 10229 Front Beach Road, Panama City Beach, Florida 32408.

3. Name of Registered Agent for Service of Process: Franklin Ernest Ford.

4. Florida street address for Registered Agent: 19806 Back Beach Road, Panama City Beach, Florida 32413.

5. Signature of Registered Agent: Franklin Ernest Ford

6. Mailing Address of the Limited Partnership: 10229 Front Beach Road, Panama City Beach, Florida 32408.

7. The latest date upon which the Limited Partnership is to be dissolved is March 1, 2005. P95 00001611A

8. Name of general partner: FEF, Inc. - 10229 Front Beach Road
Panama City Beach, FL 32408

Signed this 1 day of March, 1995.

Signature of all general partners:

Julie Ann Sowka (Signature)

Julie-Ann Sowka (Print Name)
First Witness

Arch Limited

Franklin E. Ford (Signature)

Franklin E. Ford (Print Name)
By: FEF, Inc.
Its: General Partner
By: Franklin E. Ford
Its: President

Thomas A. Mearith (Signature)

Thomas A. Mearith (Print Name)
Second Witness

Attest: _____
Secretary

(Corporate Seal)

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned constituting all of the general partners of ARCH-P Limited, a Florida Limited Partnership, certify:

The amount of capital contributions to date of the Limited Partners is $10,000.00.

The total amount contributed and anticipated to be contributed by the Limited Partners at this time totals $10,000.00.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury, I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 17 AM 9:39

(Signature)

Julie Ann Sombathy (Print Name)
First Witness

(Signature)

Thomas A. Monaitt (Print Name)
Second Witness

Arch Limited

(Signature)

Franklin E Ford (Print Name)
By: Franklin E. Ford
President
FEF, Inc.
Its: General Partner

Attest: _____
Secretary

(Corporate Seal)

STATE OF FLORIDA
COUNTY OF BAY

The foregoing was sworn to, subscribed and acknowledged before me this 1 day of March, 1995, by Franklin E. Ford, of Arch Limited on behalf of the limited partnership who did take an oath.

[X] Who is personally known by me
[ ] Who produced _____ as identification

Michele Robertson
Print Michele Robertson
Notary Public, State of Florida
My commission expires: _____
Commission #: CC103285

(Notary Seal)

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES APRIL 25, 1995
BONDED THRU HUCKLEBERRY & ASSOCIATES

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE

FILED
1995 NOV 27 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1a. DOCUMENT #
A95000000445

1.
ARCH-P LIMITED

Mailing Address:
10229 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32413

Principal Office Address:
10229 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32413

2. New Mailing Address, If Applicable
Suite, Apt. #, etc. POB 18407
City, State & Zip PCB Fl 32413

2a. New Principal Office Address, If Applicable
Suite, Apt. #, etc. 10279 Front Beach Rd
City, State & Zip Panama City Fl 32407

3. Date Formed or Registered to Do Business in FLORIDA	3a. Date of Last Report	4. State or Country of Formation
03/17/1995		FL

5a. Capital Contributions as Shown on Record	5b. Amount of Capital Contributions in FLORIDA to date	6. FEI Number	7. CERTIFICATE OF STATUS REQUIRED
$10,000.00			X Applied For / Not Applicable — $8.75 Additional Fee required for a Certificate of Status

8. FEES: 1) Filing Fee. Computed at a rate of $7 per $1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of $52.50 and a maximum of $437.50
2) Supplemental Fee $138.75 (pursuant to section 607.193 F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN $191.25 ($52.50 + $138.75) AND NO MORE THAN $576.25 ($437.50 + $138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent
FORD, FRANKLIN E
19806 BACK BEACH ROAD
PANAMA CITY BEACH FL 32413

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt. #, etc.
City

200001652292-
-12/04/95--01032--017
*****208.75 *****208.75
FL

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
FEF, INC.	10229 FRONT BEACH ROA	PANAMA CITY BEACH FL	P95000016918

AR - $70.00
SF - $138.75
11-28-95

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability ... I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE [signature] DATE 9-23-95

Typed or Printed Name of General Partner Signing Form: FRANKLIN E. FORD
Telephone Number 904 23 1150

CR2E003 (6/95)

0009601