A95000000879

Secretary of State
Division of Corporations

May 22, 1995

Dear Sir/Madam,

Enclosed is a check in the amount of

$52.50.....filing fee
$35.00.....Registered Agent Designation
$8.75.....Certificate of Status
TOTAL $96.25

I have enclosed the required documentation with this check. If there are any additional forms that need to be filed please feel free to contact me at 1-800-688-6235. Thank you.

Sincerely,

Wayne D. Harrison

1801 South Federal Highway #246
Delray Beach, Florida 33483

400001502354
-05/31/95--01090--002
*****96.25 *****96.25

FILED
95 JUN 12 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name Availability 6/2/95 dcc	
Document Examiner	DCC
Updater	DCC
[illegible]	DCC
Acknowledgment	DCC
W. P. Verifyer	DCC

TC $100.00

W95000011398

A95000000879

FLORIDA DEPARTMENT OF STATE
Division of Corporations
Tallahassee, FL. 32314

Attention: Diane Cushing
RE: Index Partners LTD. Reference letter No. 995 A 0027584

Dear Ms. Cushing,

We have not accepted any subscriptions or capital contributions to this partnership as of this date and we do not anticipate any at this time. I have marked the filing forms accordingly. Also, we have included the suffix LTD in the name of the partnership as per your instructions. Please apply the funds we submitted earlier towards processing our registration as a Florida Partnership. Thank you for your assistance in this matter.

Sincerely,

Wayne D. Harrison

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 2, 1995

WAYNE D. HARRISON
1801 SOUTH FEDERAL HIGHWAY #246
DELRAY BEACH, FL 33483

SUBJECT: INDEX PARTNERS L.P.
Ref. Number: W95000011398

We have received your document for INDEX PARTNERS L.P. and check(s) totaling $96.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of $647.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

You must add a limited partnership suffix to the name, such as LTD., LIMITED, or LIMITED PARTNERSHIP.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 995A00027584

CERTIFICATE OF LIMITED PARTNERSHIP
OF

1. INDEX PARTNERS LTD.
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")

2. 1801 S. FEDERAL HWY #246 DELRAY BEACH FL. 33483
(Business address of Limited Partnership)

3. WAYNE D. HARRISON
(Name of Registered Agent for Service of Process)

4. 1801 S. FEDERAL HWY #246 DELRAY BEACH FL. 33483
(Florida street address for Registered Agent)

5. Wayne D Harrison
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)

6. 1801 S. FEDERAL HWY #246 DELRAY BEACH FL 33483
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is MAY 2002

FILED
1995 JUN 12 PM 1:45
SECRETARY OF STATE
ALBERT GALLOWAY, JR.
TALLAHASSEE, FLORIDA

8. Name of general partner(s):

Name of general partner(s):	Specific address:
WAYNE D. HARRISON	11211 S. MILITARY TRAIL BOYNTON BEACH FL. 33483
CHARLES F. SHEARER	126 TINDALE CIR. LONGWOOD FL. 32779

Signed this 9TH *day of* MAY *19* 95.

Signature of all general partners:

Wayne D Harrison
General Partner

Ch Shearer
General Partner

General Partner

General Partner

General Partner

General Partner

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME the undersigned personally appeared WAYNE HARRISON / CHARLES SKRAMER, *a general partner of* INDEX PARTNERS LTD *a (an)* FLORIDA *limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:*

1. The amount of capital contributions of the limited partners is $ -0 .
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is $ 0 .

This 9TH day of MAY, 1995.

FURTHER AFFIANT SAYETH NOT.

Under 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.

General Partner

FILED
1995 JUN 12 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of FLORIDA
County of PALM BEACH
Date 5/9/95

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared WAYNE HARRISON CHARLES SKRAMER *(General Partner), known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership.*

IN WITNESS WHEREOF I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 9TH day of May, 1995.

Notary Public

Seal

MARGARET RASCHDORF
MY COMMISSION EXPIRES
AUGUST 2, 1998
#CC 397006
NOTARY PUBLIC, STATE OF FLORIDA

State of Florida at Large

My commission expires

A95000000879

OFFICE USE ONLY (Document #)

Indey Partners LTD.
(Requester's Name)
1801 S. Federal Hwy., #346
(Address)
Delray Beach, Fl 33483
(City, State, Zip) (Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Indey Partners LTD. (Corporation Name) (Document #)
2. (Corporation Name) A95000000879 (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____ ☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

FILED
96 JAN -2 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

FF-$367.50

1-9-96 aw

OTHER FILNGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

400001686784
-01/11/96--01044--016
****367.50 ****367.50

Examiner's Initials

CR2E031(9/92)

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

The undersigned, constituting all of the general partners of INDEX PARTNERS LTD., a Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112, Florida Statutes.

The total amount of the capital contributions of the limited partners is $ 52,500.00 .

This 26 day of DECEMBER, 19 95.

FURTHER AFFIANT SAYETH NOT.

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

General Partner

Wayne O Hamin

FILED
96 JAN -2 PM 2:18
SECRETARY OF STATE
TALLAHASSEE FLORIDA

INHSE 20 (7-90)

FEES: $7 per $1000, based on the additional contributions
Minimum $52.50 - Maximum $1750

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
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 JAN -2 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership: INDEX PARTNERS LTD.

1a. DOCUMENT # A95000000879

Mailing Address: 1801 S. FEDERAL HWY., #246, DELRAY BEACH FL 33483

Principal Office Address: 1801 S. FEDERAL HWY., #246, DELRAY BEACH FL 33483

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

2. New Mailing Address, if Applicable: 11211 So. MILITARY TRAIL
Suite, Apt. #, etc.: # 2524
City, State & Zip: BOYNTON BEACH FLORIDA 33436

2a. New Principal Office Address, if Applicable
Suite, Apt. #, etc.:
City, State & Zip:

3. Date Formed or Registered to Do Business in FLORIDA: 06/12/1995

3a. Date of Last Report: 6/12/95

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on Record: $0.00

5b. Amount of Capital Contributions in FLORIDA to date: $52,500.00

6. FEI Number: 65-0621929

7. CERTIFICATE OF STATUS REQUIRED: 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:
HARRISON, WAYNE D
1801 S FEDERAL HWY #246
DELRAY BEACH FL 33483

10. If changed, new Registered Agent/Office
Name: 700001685657
Street Address (P.O. Box Number is Not Acceptable): 01/10/96--01147--025
Suite, Apt. #, etc.: ****506.25 ****506.25
City: FL
Zip Code:

10a. Pursuant to the provisions of sections 620.105 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
HARRISON, WAYNE D	11211 S. MILITARY TRA	BOYNTON BEACH FL 3348	
SHEARER, CHARLES F	128 TINDALE CIRCLE	LONGWOOD FL 32779	

AR - $367.50
SF - $138.75

1-9-96

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non compliance with Section 119.07(3)(i), in the event that the information supplied is deemed exempt from public access. Further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. Further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE: Wayne D Harrison

Typed or Printed Name of General Partner Signing Form: WAYNE D. HARRISON

DATE: 12/26/95

Telephone Number:

CR2E003 (6/95)

0007408