

1201 HAYS STREET
TALLAHASSEE, FL 32301
(904) 222-0100
(1-222-0100)

800-342-8086

A95000000919



ACCOUNT NO. : 0721000000032

REFERENCE : 621661 11175A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : June 16, 1995

ORDER TIME : 1:55 PM

ORDER NO. : 621661

CUSTOMER NO: 11175A

CUSTOMER: Ms. Cyleste A. Wollett
WOLLETT & ASSOCIATES, PA

Suite 103
4440 P.g.a. Boulevard
Palm Beach Gard, FL 33410

100001520661
-06/22/95--01052--024
***1785.00 ***1785.00

File 2nd

DOMESTIC FILING	U. TAX	_____
	FILING	_____ 1750
	R. AGENT FEE	_____ 35
	3. COPY	_____
	TOTAL	_____ 1785
	V. BANK	_____
	BALANCE DUE	_____
	REFUND	_____

NAME: SABA ROCK, LTD.

ARTICLES OF INCORPORATION
☒ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrea C. Mabry

EXAMINER'S INITIALS: PK

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 19 PM 4:20

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 16 PM 4:20

DIVISION OF CORPORATIONS

95 JUN 15 PM 2:10

5/16

CERTIFICATE OF LIMITED PARTNERSHIP
OF
SABA ROCK, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUN 16 1995
PH 4:20

1. SABA ROCK, LTD.
(Name of Limited Partnership; must contain suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. c/o 4440 PGA BLVD., SUITE 103, PALM BEACH GARDENS, FL 33410
(The Business Address of the Limited Partnership)
3. CYLESTE A. WOLLETT
(Name of Registered Agent for Service of Process)
4. 4440 PGA BLVD., SUITE 103, PALM BEACH GARDENS, FL 33410
(Florida Street Address for Registered Agent)
5. *Cyleste A. Wollett*
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. C/O 4440 PGA BLVD., SUITE 103, PALM BEACH GARDENS, FL 33410
(The Mailing Address of the Limited Partnership)
7. The latest date upon which the Limited Partnership is to be dissolved is JANUARY 1, 2050.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUN 16 1995
PH 4:20

8. NAME OF GENERAL PARTNER(S)	SPECIFIC ADDRESS
<u>SABA ROCK VENTURES, INC.</u>	<u>C/O 4440 PGA BLVD.</u>
	<u>SUITE 103</u>
	<u>PALM BEACH GARDENS, FL</u>
	<u>33410</u>

P950000 47207

Signed this 15th day of June, 1995

Signature of all General Partners:

SABA ROCK VENTURES, INC.

Cyleste A. Wollett
CYLESTE A. WOLLETT, ASSISTANT
SECRETARY

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of SABA ROCK, LTD., a Florida Limited Partnership, certify as follows:

The amount of capital contributions to date of the limited partners is:

\$ 371,250.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals:

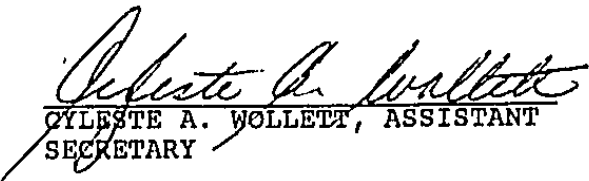
\$4,950,000.00

This 15th day of June, 1995.

FURTHER AFFIANT SAYETH NAUGHT.

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

SABA ROCK VENTURES, INC.


CYLESTE A. WOLLETT, ASSISTANT
SECRETARY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 16 PM 4:20

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 16 PM 4:20

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
Division of Corporations
Tallahassee, Florida 32399
Phone: 904-488-2400

FILED

1995 NOV 30 AM 9:55

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership
SABA ROCK, LTD.

1n. DOCUMENT #
A95000000919

Mailing Address
**4440 PGA BLVD., SUITE 100
PALM BEACH GARDENS FL 33410**

Principal Office Address
**4440 PGA BLVD., SUITE 100
PALM BEACH GARDENS FL 33410**

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

3. Date Limited Partnership Registered in
FLORIDA
06/16/1995

3n. Date of Last Report
N/A

4. State or Country of Formation
FL

5a. Capital Contributions in Shares
on Record
\$4,950,000.00

5b. Amount of Capital Contributions in
FLORIDA to date
\$371,250.00

6. FID Number
65-0590214

Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED
- \$8.75 Assignment 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 5a or 5b if 5b blank, with a minimum filing fee of \$42.50 and a maximum of \$437.50.
2) Supplemental Fee: \$138.75 (pursuant to section 607.103, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$101.25 (\$42.50 + \$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
**WOLLETT, CYLESTE A
4440 PGA BLVD., SUITE 100
PALM BEACH GARDENS FL 33410**

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number in First Address)
City, State & Zip
City, State & Zip Code

10a. Pursuant to the provisions of sections 620.105(1) and 620.107, 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). Thereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.107, 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. Registry/ Document Number
SABA ROCK VENTURES, INC.	4440 PGA BLVD., SUITE	PALM BEACH GARDENS FL	P95000047207
		AR. \$437.50 SF \$138.75 12-1-95	

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

12. I hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in section 607.103(3)(b), Florida Statutes. I represent the Division of Corporations, Department of State, and the public that the information supplied is accurate and 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. I further certify that I am a general partner of the limited partnership, recipient or trustee empowered to execute this report, as required by Florida Statutes.

SIGNATURE *Cyleste Wollett*
SABA ROCK VENTURES, INC.
Typed or Printed Name of General Partner Signing Form: CYLESTE WOLLETT, ASST. SEC.

DATE 11-28-95
Telephone Number (407)622-0800