

1201 HAYS STREET
TALLAHASSEE, FL 32301

800-342-8086

904-222-9171
OFFICE FAX

A95000001287



ACCOUNT NO. : 072100000032

REFERENCE : 671574 5312A

AUTHORIZATION :

COST LIMIT : 9 PPD

ORDER DATE : August 30, 1995

ORDER TIME : 9:43 AM

ORDER NO. : 671574

CUSTOMER NO: 5312A

CUSTOMER: Olin G. Shivers, Esq
ANNIS MITCHELL COCKEY
EDWARDS & ROEHN, P.A.
Suite 2100
201 North Franklin Street
Tampa, FL 33602

DOMESTIC FILING

NAME: CORTEZ OVENS, LTD.

XXX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XXXX PLAIN STAMPED COPY
XXXX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sebrana Randolph

EXAMINER'S INITIALS:

FILED
STATE
SECRETARY OF CORPORATIONS
95 AUG 30 AM 11:44

2000001576912
-09/05/95--01045--006
***1750.00 ***1750.00

2000001576912
-09/05/95--01045--007
****43.75 ****43.75

G. TAX _____
FILING _____ 17.50
AGENT FEE _____ 35
COPY _____ 8.25
TOTAL _____ 1793.75
G. BARK _____
CHANGE DUE _____

8/30/95

CERTIFICATE OF
LIMITED PARTNERSHIP OF
CORTEZ OVENS, LTD.

The undersigned hereby executes and swears to this
Certificate of Limited Partnership for the purpose of forming
a limited partnership under the laws of the State of Florida.

1. Name of Partnership. The name of the partnership
shall be CORTEZ OVENS, LTD.

2. Address of Recordkeeping Office; Agent for Service
of Process. The records to be kept pursuant to Florida
Statute Section 620.106 shall be located at 201 N. Franklin
Street, Suite 2100, Tampa, Florida 33602, and the name of the
Partnership's agent for service of process at said address is
Preston O. Cockey, Jr., Esquire.

3. Name and Business Address of the General Partner.
(a) The name and address of the General Partner is
as follows:

<u>Name</u>	<u>Address</u>
OVENS MANAGEMENT, INC.	SIX PPG PLACE SUITE 1110 PITTSBURGH, PA 15222

4. Mailing Address for the Limited Partnership. The
mailing address for the Limited Partnership shall be located
at Six PPG Place; Suite 1110; Pittsburgh, PA 15222.

5. Term. The term for which the partnership is to
exist shall be thirty (30) years from the filing of this
Certificate in the Office of the Secretary of State of the
State of Florida, unless sooner terminated in accordance with

95 AUG 30 11:14 AM
SECRETARY OF STATE
TAMPA, FLORIDA

a Limited Partnership Agreement for CORTEZ OVENS, LTD.

DATED this 24th day of August, 1995.

GENERAL PARTNER:

OVENS MANAGEMENT, INC.

By:

Title:

GW DiFrango
VICE PRESIDENT

FILED STATE
SECRETARY OF CORPORATIONS
25 AUG 30 AM 11:44

STATE OF PENNSYLVANIA
COUNTY OF ALLEGHENY

The foregoing was acknowledged before me this 24th day of August, 1995, by Gerald W. DiFrango, the Vice President of OVENS MANAGEMENT, INC. the general partner of the limited partnership, who is personally known to me or who has proper identification and who did take an oath.

Barbara A. James
NOTARY PUBLIC

Name: *BARBARA A. JAMES*

Serial No.

My Commission Expires:

Notarial Seal
Barbara A. James, Notary Public
Pittsburgh, Allegheny County
My Commission Expires July 21, 1997
Member, Pennsylvania Association of Notaries

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within Limited Partnership, at the place designated herein, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Preston O. Cockey
(Preston O. Cockey, Jr., Esq.)

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

I, Gerald W. DiFrango, the Vice President of OVENS MANAGEMENT, INC. the sole general partner of CORTEZ OVENS LTD., a Florida limited partnership, hereinafter referred to as the "Partnership," who, upon being sworn, certifies as follows:

1. The limited partner has contributed \$550,000 of capital to the Partnership.

2. It is anticipated that no additional contributions shall be contributed by the limited partners in the future.

This 24th day of August, 1995.

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.

GENERAL PARTNER:

OVENS MANAGEMENT, INC.

By: GW DiFrango

Title: VICE PRESIDENT

STATE OF PENNSYLVANIA
COUNTY OF ALLEGHENY

The foregoing was acknowledged before me this 24th day of August, 1995, by Gerald W. DiFrango, the Vice President of OVENS MANAGEMENT, INC., the general partner of the limited partnership, who is personally known to be or who has produced proper identification and who did take an oath.

Barbara A. James
NOTARY PUBLIC

Name: BARBARA A. JAMES

Serial No. _____

My Commission Expires: _____

Notarial Seal
Barbara A. James, Notary Public
Pittsburgh, Allegheny County
My Commission Expires June 21, 1997
Member, Pennsylvania Association of Notaries

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
Capital Division
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
CORPORATIONS

96 JAN -8 PM 4:13

1. Name of Partnership
CORTEZ OVENS, LTD.

1a. DOCUMENT #

APC 06601287

Main Office Address
SIX PPG PLACE
SUITE 1110
PITTSBURGH, PA 15222

Principal Office Address
SIX PPG PLACE
SUITE 1110
PITTSBURGH, PA 15222

2. New Mailing Address of Applicant

State, Apt. # etc.

City, State & Zip

2a. New Principal Office Address of Applicant

State, Apt. # etc.

City, State & Zip

3. Date of Partnership in Florida
FLORIDA
AUGUST 30, 1995

3a. Date of Last Report
INITIAL

4. State of Country of Formation
FLORIDA

5a. Capital Contribution by Partners
without Interest
\$550,000

5b. Amount of Capital Contribution in
FLORIDA Dollars

6. Telephone
65-0563558

Approved for
First Application

7. CERTIFICATE OF STATUS REQUIRED ☐
\$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 607.103, F.S.)
THE AMOUNT DUE SHALL BE NOT 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

PRESTON O. COCKEY, ESQUIRE
ANNIS, MITCHELL, COCKEY, EDWARDS & ROEHN
SUITE 2100
ONE TAMPA CITY CENTER
TAMPA, FLORIDA 33601

10. If changed, new Registered Agent Office

Name

Street Address (P.O. Box Number is Not Acceptable)

State, Apt. # etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.105, 620.106 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 and agree to accept the obligations of sections 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Number)

11b. City, State & Zip Code

11c. Registered Document Number

OVENS MANAGEMENT, INC.

SIX PPG PLACE
SUITE 1110

PITTSBURGH, PA 15222

P994000048308

000001686280
-01/11/96--01021--011
4444576.35 4444576.35

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 report is complete and correct, and that I am a general partner in the partnership. I understand that if I fail to file this report, the partnership may be subject to revocation and a \$500 penalty fee. I understand that if I fail to file this report, the partnership may be subject to revocation and a \$500 penalty fee. I understand that if I fail to file this report, the partnership may be subject to revocation and a \$500 penalty fee.

SIGNATURE

[Signature]

DATE 1-5-92

Typed or Printed Name of General Partner: LAWRENCE J. FLECHER, General Partner Telephone Number: 412-222-3720

CR2E003 (6/95)

A95000001287

Requestor's Name
Thomas A. Gols
273 Belleair Drive NE
St. Petersburg, Fla 33704

City/State/Zip

Phone #

Office Use Only

FILED
97 MAR 21 PM 12:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

600002075756--7
-02/03/97--01037--005
*****35.00 *****35.00

A95000001287
RA Chg.
VS MAR 21 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 12, 1997

THOMAS A. GEIS
273 BELLEAIR DRIVE, N.E.
ST. PETERSBURG, FL 33704

SUBJECT: CORTEZ OVENS, LTD.
Ref. Number: A95000001287

We have received your document for CORTEZ OVENS, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 487-6916.

Carol Mustain
Corporate Specialist

Letter Number: 197A00007441

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH

FILED
97 MAR 21 PM 12:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership organized under the laws of the state of FLORIDA, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. CORTEZ OWENS, LTD
Name of the limited partnership

2. AUGUST 30, 1995 3. A95000001287
Date of filing/registration in Florida Document number assigned

4. The name and address of the present registered agent and office:

Preston D. Cockey, Jr., Esq.
To Annis, Mitchell, Cockey, Est A1
One Tampa City Center, Tampa, FL 33601

5. The name and street address of the successor registered agent and office: (P.O. Box not acceptable)

THOMAS A. GEIS
273 BELLAIR DRIVE NE
ST. PETERSBURG, FL 33704

Such change was authorized by the general partners.

[Signature] 3/15/97
Signature of General Partner Date

Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Thomas A. Geis 2-19-97
Registered Agent signature Date

Filing Fee: \$35.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314