

WILLIAM T. GRAVINS
(704) 371-0323

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THE GUERIN BUILDING
ONE LAW PLACE - SUITE 100
P.O. DRAWER 12070
ROCK HILL, S.C. 29730
TELEPHONE (803) 325-2900
FAX (803) 325-2929

FILED STATE
SECRETARY OF CORPORATIONS
DAVENPORT
JAN 19 1956

VIA FEDERAL EXPRESS

Florida Department of State
409 East Gaines Street
The Capital Room 2002
Post Office Box 6327
Tallahassee, Florida 32301-8047

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-09/01795--01070--005
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Attention: Limited Partnership Division

Re: Faison-Fleming Island Business Center Limited Partnership

Dear Sir/Madam:

Please find enclosed herein the following documents for filing with your office:

1. Two (2) original, of the Certificate of Limited Partnership;
2. Two (2) originals of the Affidavit of Capital Contributions of the Limited Partners of Faison-Fleming Island Business Center Limited Partnership; and
3. Our firm's check in the amount of \$87.50 to cover the filing fees.

Please file these documents and return copies to us showing filing information in the enclosed, self-addressed, stamped envelope.

Please contact the undersigned should you have any questions.

Sincerely,

ROBINSON, BRADSHAW & HINSON, P.A.

ROBINSON, BRADSHAW &
Wilkes L. Shaw

William T. Graves

Name	filing in
Availability	envelope.
Document	Pleas
Number	DCC
Date	DCC
Time	DCC
Address	DCC
Telephone	DCC
Enclosures	DCC
Remarks	DCC
Signature	DCC
Initials	DCC
Verdict	DCC
Enclosures	DCC

1495000 17738

\$100.00

CERTIFICATE OF LIMITED PARTNERSHIP

The undersigned general partner hereby files this Certificate of Limited Partnership of Faison-Fleming Island Business Center Limited Partnership (the "Partnership") with the Florida Department of State in order to form a limited partnership pursuant to Section 620.108 of the Florida Revised Limited Partnership Act (1986) (the "Act").

1. Name. The name of the Partnership is Faison-Fleming Island Business Center Limited Partnership.

2. Business Address. The business address of the Partnership in the State of Florida and the address at which the Partnership shall keep the records regarding the name, address and capital contributions of its limited partners is as follows:

Suite 500
225 E. Robinson Street
Orlando, Florida 32801
Attention: Mr. John M. Joyce

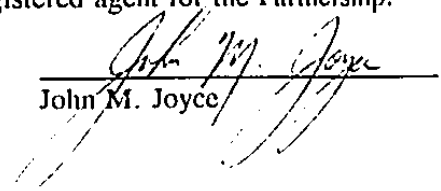
3. General Partner. The name and the business address of the general partner of the limited partnership is:

Faison Capital Development, Inc.
121 West Trade Street
1900 Interstate Tower
Charlotte, North Carolina 28202-5399
Attention: Mr. Robert W. Liptak

4. Registered Agent and Registered Office. The name and address of the registered agent for service of process are:

Mr. John M. Joyce
Suite 500
225 E. Robinson Street
Orlando, Florida 32801

The registered agent has signed in the space below to evidence his acceptance of his appointment as registered agent for the Partnership.


John M. Joyce

Date: 8/24, 1995

5. Partnership Mailing Address. The mailing address for the limited partnership is:

121 West Trade Street
1900 Interstate Tower
Charlotte, North Carolina 28202-5399

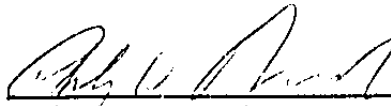
6. Latest Dissolution Date. The latest date upon which the limited partnership dissolve is December 31, 2051.

Signed this 29th day of August, 1995.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 SEP 14 AM 11:56

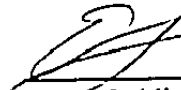
FAISON CAPITAL DEVELOPMENT, INC.,
General Partner

By:


Philip W. Norwood,
President

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

THE FOREGOING instrument was acknowledged and sworn to before me, this 29th day of August, 1995, by Philip W. Norwood, President of FAISON CAPITAL DEVELOPMENT, INC., General Partner of Faison-Fleming Island Business Center Limited Partnership, a Florida limited partnership.


Notary Public

State of North Carolina at Large

My Commission Expires: 5-2-2000

[NOTARIAL SEAL]

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
OF THE LIMITED PARTNERS OF FAISON-FLEMING ISLAND BUSINESS
CENTER LIMITED PARTNERSHIP, A FLORIDA LIMITED PARTNERSHIP**

BEFORE ME the undersigned personally appeared Philip W. Norwood, President of Faison Capital Development, Inc., a North Carolina corporation, general partner of Faison-Fleming Island Business Center Limited Partnership, a Florida limited partnership (hereinafter referred to as the "Partnership"), who certifies as follows:

1. The amount of capital contributions of the limited partners of the Partnership is One Hundred Dollars (\$100.00).

2. The ^{total} anticipated amount of the capital contributions of the limited partners that are² allocated for the purposes of transacting business in Florida is One Hundred Dollars (\$100.00).

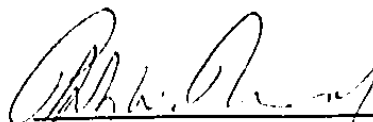
This 29th day of August, 1995.

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.

FAISON CAPITAL DEVELOPMENT, INC., a
North Carolina corporation, General Partner of
Faison-Fleming Island Business Center Limited
Partnership

By:



Philip W. Norwood
President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 SEP 13 AM 11:56

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

August __, 1995

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgements in and for the State and County set forth above, personally appeared Philip W. Norwood, President of Faison Capital Development, Inc., General Partner of Faison-Fleming Island Business Center Limited Partnership, 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 the President of the General Partner of Faison-Fleming Island Business Center Limited Partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 3rd day of August, 1995.



Notary Public

State of North Carolina at Large

My Commission Expires: 5-2-2000

[NOTARIAL SEAL]

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 SEP 13 AM 11:57

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

LIMITED PARTNER
WINDOW REPORT
1996

A95000001358

FILED

95 NOV -6 PM 2:01

TALLAHASSEE, FLORIDA

1n. DOCUMENT #
A95000001358

Faison-Fleming Island Business Center
Limited Partnership

Mailing Address

Registered Office Address

121 West Trade Street
1900 Interstate Tower
Charlotte, NC 28202

2. New Mailing Address, If Applicable

3n. App. please add: Attn: Legal Dept.

City, State & Zip

2n. New Principal Office Address, If Applicable

City, State & Zip

Partner and the designee must file this form with the Department of Banking and Finance, Tallahassee, Florida.

3. Date of Filing of Report to the Department
FLORIDA

9/13/95

3n. Date of Last Report

4. State of Incorporation

FL

5a. Capital Contribution as Stated
on Report

\$100.00

5b. Amount of Capital Contribution as
FLORIDA to date

\$100.00

6. Filer Number

56-1941401

App. Fee

Not Applicable

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 NO LESS THAN \$101.25 (\$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

10. If changed, New Registered Agent Office

John M. Joyce
Suite 500
225 E. Robinson Street
Orlando, FL 32801

Type

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

City, State & Zip

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.102, 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 620.102, 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 Numbers)

11b. City, State & Zip Code

11c. Registered
Development Number

Faison Capital Development,
Inc.

121 W. Trade Street
Suite 1900

Charlotte, NC 28202

F92000000164

000001635380
-11/14/95--01055--009
****191.25 ****191.25

KWM

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 form is voluntarily furnished and is correct, fully in the exemption stated in Section 119.07(3)(b), Florida Statutes, to release the Department of Banking and Finance, Tallahassee, Florida, from any liability of such information with the Department of Banking and Finance, Tallahassee, Florida, in the event that the information supplied is determined to be false or misleading. I further certify that the information included on this form is true and accurate and that the signature shall have the same legal effect as if made under oath. I am a General Partner of the limited partnership, the owner of the partnership, or the designee of the partnership, as defined in Section 620.102, Florida Statutes.

SIGNATURE

DATE

11/1/95

Typed or Printed Name of General Partner Signing Form

Elizabeth M. Speed, Asst. Secretary

Telephone Number

704/331-2500

CR2E003 (6/95)