A95000001361

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-09/12/95--01003--004
***1802.50 ***1802.50

CORPORATION TRANSMITTAL:

Re: Jirene Limited

Date: September 8, 1995

Enclosed are the original and copy of proposed certificate of limited partnership with our check for your fees computed as:

Filing fee	$ 1,750.00
Certified copy	$ 52.50

Please certify the copy and return it to us.

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Trawick, Valentine
& Hagan, P.A.
P.O. Box 4019
Sarasota, Florida 34230

HPT/jam

FILED
1995 SEP 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name Availability	KWM
Document Examiner	KWM
[illegible]	[illegible]
Updater [illegible]	KWM
W. P. Verifyer	KWM

FILED

1995 SEP 11 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JIRENE LIMITED
CERTIFICATE OF LIMITED PARTNERSHIP

THIS CERTIFICATE is executed to form a limited partnership under Florida law.

1. NAME. The name of the limited partnership shall be JIRENE LIMITED.

2. AGENT. The office address is 6000 South Tamiami Trail, Sarasota, Florida 34231 and name and address of the agent for service of process is:

Jack D. Urfer — 6000 South Tamiami Trail, Sarasota, Florida 34231

3. GENERAL PARTNER. The name and business address of each general partner is:

TJU, Inc. - P95000067999 — 6000 South Tamiami Trail, Sarasota, Florida 34231

4. MAILING ADDRESS. The mailing address for the limited partnership is the same.

5. DISSOLUTION. The latest date when the limited partnership is to dissolve is December 31, 2040.

DATED on ~~June~~ August 24, 1995.

GENERAL PARTNER

TJU, INC.

By _____
As President

LIMITED PARTNERS

_____
Jack D. Urfer

_____
Thelma I. Urfer

ACCEPTANCE OF AGENT

HAVING BEEN NAMED as agent for service of process on this limited partnership, the undersigned accepts the designation.

Jack D. Urfer

AFFIDAVIT ON CAPITAL CONTRIBUTIONS

STATE OF FLORIDA
COUNTY OF SARASOTA

Before me, the undersigned authority, personally appeared JACK D. URFER, who was sworn and says that he is the president of TJU, INC. and that the amount of the capital contributions of the limited partners is $900,000 and the amount anticipated to be contributed by the limited partners is $-0-.

Jack D. Urfer

Sworn to and subscribed before me on June 21, 1995, by Jack D. Urfer.

Notary Public

OFFICIAL NOTARY SEAL
HENRY P TRAWICK JR
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC193998
MY COMMISSION EXP. MAY 7,1996

Personally Known ✓ OR Produced Identification _____
Type of Identification Produced _____

/pjh

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

A95000001361

FILED
96 JAN -3 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership: JIRENE LIMITED

1a. DOCUMENT # A95000001361

96-AR

CM

2. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

2a. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

Mailing Address / Principal Office Address

6000 S. Tamiami trail
Sarasota, florida 34231

If an address is incorrect in any way, line through the incorrect info... address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in FLORIDA: 9/11/95

3a. Date of La... (est): N/A

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on Record: 9000,000.

5b. Amount of Capital Contributions in FLORIDA to date: 900,000.

6. FEI Number: 65-0618663

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: $130.75 (pursuant to section 607.103, 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

576.25

9. Name and Address of Current Registered Agent

Jack D. Urfer
6000 South Tamiami Trail
Sarasota, Florida 34231

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt. #, etc.

City: FL

Zip Code

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
TJU, Inc	6000 S. Tamiami Tr.	Sarasota, Florida 34231	P95000047499

100001686521
-01/11/96--01032--022
****576.25 ****576.25

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)(k) in the event that the information supplied is deemed exempt from public access. I 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; I 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 Thelma Urfer DATE 1.2.27.95

Typed or Printed Name of General Partner Signing Form: Thelma Urfer Telephone Number: 941-923-2700

CR2E003 (6/95)