

1201 HAYS STREET
TALLAHASSEE, FL 32304

800-342-8086

A95000001374

CSC networks

PREMIUM
TELECOMMUNICATIONS SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 682084 4134B

AUTHORIZATION : *Patricia Pyatt*

COST LIMIT : \$ 140.75

FILED
STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 SEP 14 PM 2:18

ORDER DATE : September 14, 1995

ORDER TIME : 10:0 AM

ORDER NO. : 682084

CUSTOMER NO: 4134B

200001584812

CUSTOMER: Ms. Helen Brock Ford
BROAD AND CASSEL

Suite 1100
390 N. Orange Avenue
Orlando, FL 32801

DOMESTIC FILING

NAME: HOUSTON MAXEY HOUSING
ASSOCIATES, LTD.

FILE SECOND

ARTICLES OF INCORPORATION
XXX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXXX CERTIFIED COPY
 PLAIN STAMPED COPY
XXXX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sabrena Randolph

EXAMINER'S INITIALS: *BRK*

RECEIVED
SEP 14 11:07

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
HOUSTON MAXEY HOUSING ASSOCIATES, LTD.**

FILED STATES
SECRETARY OF CORPORATIONS
95 SEP 11 AM 2:18

Pursuant to the authority of Section 620.108, Florida Statutes, the undersigned, constituting the sole general partner of HOUSTON MAXEY HOUSING ASSOCIATES, LTD. (the "Partnership"), hereby submits the following in connection with the formation of the Partnership:

1. The name of the Partnership shall be HOUSTON MAXEY HOUSING ASSOCIATES, LTD.

2. The address of the office where records shall be kept shall be 6000 Westown Parkway, Suite 200W, West Des Moines, Iowa 50266-7711. The name and address of the registered agent for service of process is B&C Corporate Services of Central Florida, Inc., 390 North Orange Avenue, Suite 1100, Orlando, Florida 32801.

3. The name and business address of the sole general partner is:

Maxx Housing, Inc., an Iowa Corporation

6000 Westown Parkway, Suite 200W
West Des Moines, Iowa 50266-7711

F95000004464

4. The mailing address of the limited partnership is 6000 Westown Parkway, Suite 200W, West Des Moines, Iowa 50266-7711.

5. The latest date upon which the Partnership is to dissolve shall be December 31, 2046.

This Certificate has been executed by the undersigned this 7th day of September, 1995.

GENERAL PARTNER:

MAXX HOUSING, INC., an Iowa
Corporation

By: Sarah Bowers

Sarah Bowers, Vice President

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 SEP 14 PM 2:18

ACKNOWLEDGEMENT OF REGISTERED AGENT

Having been designated as Registered Agent for HOUSTON MAXBY HOUSING ASSOCIATES, LTD., the undersigned hereby accepts the designation and agrees to act as the Registered Agent of said limited partnership and states that the undersigned is familiar with its statutory obligations as such.

B&C Corporate Services of Central Florida,
Inc.

By: [Signature]
Randal M. Allgood, its Vice President

Dated this 3rd day of September, 1995.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 SEP 14 PM 2:18

AFFIDAVIT
OF
CAPITAL CONTRIBUTION

FILED STATE
SECRETARY OF CORPORATIONS
95 SEP 14 PM 2:18

The undersigned being the sole general partner of HOUSTON MAXEY HOUSING ASSOCIATES, LTD., and being duly sworn do hereby set forth the following for the purposes of accompanying the filing of the Certificate of Limited Partnership of HOUSTON MAXEY HOUSING ASSOCIATES, LTD. with the Florida Department of State, as required by Section 620.108, Florida Statutes.

The amount of the capital contributions of the limited partners as of the date hereto is \$50.00 and no further capital contributions from the limited partners are reasonably anticipated at this time.

Dated this 7th day of September, 1995.

GENERAL PARTNER:
MAXX HOUSING, INC., an Iowa
Corporation

By: Sarah Bowers
Sarah Bowers, Vice President

STATE OF IOWA

COUNTY OF DALLAS

The foregoing instrument was acknowledged before me this 7th day of September, 1995, by Sarah Bowers, as Vice President of MAXX HOUSING, INC., General Partner of HOUSTON MAXEY HOUSING ASSOCIATES, LTD.

Christine M. Woosley
Notary Public
My Commission Expires:
Print, type or stamp name



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

1. Name of Limited Partnership HOUSTON MAXEY HOUSING ASSOCIATES, LTD.		1a. DOCUMENT # A95000001374	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Mailing Address 6000 Westown Parkway Suite 200W West Des Moines, Iowa 50266-7711		DO NOT WRITE IN THIS SPACE 2. New Mailing Address, if Applicable Same as mailing. 6000 Westown Parkway Suite 200W West Des Moines, Iowa 50266-7711		
3. Date of Report or Registered to Do Business in FLORIDA September 14, 1995		3a. Date of Last Report	4. State or Country of Formation FL	5. City, State & Zip 6000 Westown Parkway Suite 200W West Des Moines, Iowa 50266-7711
5a. Capital Contributions as Shown on Return \$50.00	5b. Amount of Capital Contributions in FLORIDA to date	6. FID Number 59-3333715		7. CERTIFICATE OF STATUS IN COMPLIANCE ☐
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 B&C Corporate Services of Central Florida, Inc. 390 North Orange Avenue Suite 1100 Orlando, Florida 32801		10. If changed, new Registered Agent/Office Name: Site of Address (P.O. Box Number is Not Acceptable): City, State & Zip: FL		
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, submit 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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.				
11. Name(s) of General Partner(s) MAXX HOUSING, INC., an Iowa corporation	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 6000 Westown Parkway Suite 200W	11b. City, State & Zip Code West Des Moines, IA 50266-7711	11c. Registration Document Number F95000004464	
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 effect 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 By: <u>Sarah Bowers</u> Typed or Printed Name of General Partner Signing Form: <u>Sarah Bowers</u>		DATE <u>9/19/95</u> Telephone Number <u>(407) 660-1110</u>		

CR2E003 (6/95)