A95000001410

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

SUBJECT: Naples Plaza Limited Partnership

Enclosed is an original and one(1) copy of the certificate of limited partnership and a check for:

$96.25 Filing Fee & Certificate

FROM: Arnold Y. Aronoff
626 Gulf Shore Blvd. South
Naples, Florida 33940
(810) 642-0190

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 SEP 18 PM 3:41

9/18/95

CERTIFICATE OF LIMITED PARTNERSHIP
OF
NAPLES PLAZA LIMITED PARTNERSHIP

1. Naples Plaza Limited Partnership
(Name of Limited Partnership, must contain a suffix such as "Limited", "Ltd ", or "Limited partnership")

2. 626 Gulf Shore Blvd South, Naples, Florida 33940
(The Business Address of Limited Partnership)

3. Arnold Y Aronoff
(Name of Registered Agent for Service of Process)

4. 626 Gulf Shore Blvd. South, Naples, Florida 33940
(Florida Street Address for Registered Agent)

5. _____
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process.)

6. P.O. Box 893, Bloomfield Hills, Michigan 48303
(The Mailing Address of the Limited Partnership.)

7. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2045.

8.

NAME OF GENERAL PARTNER(S)	SPECIFIC ADDRESS
Naples Plaza, Inc.	626 Gulf Shore Blvd., South Naples, Florida 33940

Signed this 14th day of September, 1995.

Signature of all general partners:

General Partner:
Naples, Plaza Inc.

By: _____
Arnold Y. Aronoff
Its: President

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of Naples Plaza Limited Partnership, a Florida Limited Partnership, certify as follows

The amount of capital contributions to date of the limited partners is $100.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals $100.00

This 14th day of September, 1995.

FURTHER AFFIANT SAYETH NOT

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

General Partner:
Naples, Plaza Inc.

By _____
Arnold Y. Aronoff
Its President

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

A95000001410

LIMITED PARTNERSHIP ANNUAL REPORT 1996

FILED
95 DEC 13 AM 2 01

1a. DOCUMENT #
A95000001410

1. Naples Plaza Limited Partnership

96-AR

CM

Mailing Address:
P.O. Box 893
Bloomfield Hills, MI 48303

Principal Office Address:
626 Gulf Shore Blvd., So.
Naples, FL 33940

2. New Mailing Address, if Applicable

500001673549
-12/28/95--01093--016
****191.25 ****191.25

2a. New Principal Office Address, if Applicable

3. Date First Filed in Florida: 9/18/95

4. FL

5a. Capital Contributions as Shown of Record: $100.00

5b. Total Capital Contributions in Florida: $100.00

6. FEI Number: 65-0613362

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 607.193, 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

Arnold Y. Aronoff
626 Gulf Shore Blvd., So.
Naples, FL 33940

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 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. Registration/Document Number
Naples Plaza, Inc.	626 Gulf Shore Blvd., So.	Naples, FL 33940	P95000072293

CR2E003 (6/95)

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 does not qualify for the exemption ... Florida Statutes.

SIGNATURE

Typed or Printed Name of ... General Partner: Arnold Y. Aronoff, President

DATE 12/11/95

Telephone Number: (810) 642-0190