

A95000001435

GERALD DAVID AUGUST
RICHARD B. COMITER
JOSEPH J. KULONAS
MITCHELL D. SCHEPPS

JAMES J. FREELAND
OF COUNSEL

ONE CLEARLARK CENTRE
200 AUSTRALIAN AVENUE SOUTH
SUITE 100
WEST PALM BEACH, FLORIDA 33401

(407) 835-9600
FAX (407) 835-9602

PLEASE RESPOND TO
WEST PALM BEACH

WASHINGTON, D.C. OFFICE
501 SCHOOL STREET, S.W.
SUITE 200
WASHINGTON, D.C. 20024
(202) 646-5100

ENCLOSURE 1
0072795-01050-005
***1785.00 ***1785.00

September 22, 1995

FEDEX

Attention: Steve Marcus
GRN/Corporate Creations
1704 Thomasville Road, Ste. 106
Tallahassee, FL 32303.

Re: National Lien Management, Ltd.

Dear Steve:

Enclosed please find Certificate of Limited Partnership, Affidavit of Capital Contribution and Acceptance of Appointment as Registered Agent for the above-referenced limited partnership. Please walk into the Secretary of State and file the documents on the same day you receive them. I have enclosed a check in the amount of \$1,785 for filing fees. A copy of the original has also been provided for date-stamping purposes and I ask that you return same to me in the enclosed pre-addressed Federal Express envelope.

If you have any questions, please do not hesitate to call.

Very truly yours,

Rita M. Burdo, Legal Assistant
MITCHELL D. SCHEPPS

enclosures

cc: Richard B. Comiter, Esq.
NatLien.lti

95 SEP 25 PM 4:03
SECRETARY OF STATE
DIVISION OF CORPORATIONS & TO

**CERTIFICATE OF LIMITED PARTNERSHIP OF
NATIONAL LIEN MANAGEMENT, LTD.,
A FLORIDA LIMITED PARTNERSHIP**

The undersigned general partner of National Lien Management Inc. (the "General Partner") desires to form a partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Chapter 620 of the Florida Statutes, hereby states the following:

1. The name of the Partnership is National Lien Management, Ltd.
2. The address of the office of the Partnership is 1700 Palm Beach Lakes Boulevard, Suite 1100, West Palm Beach, Florida 33401.
3. The name and address of the agent for service of process of the Partnership is National Lien Management, Inc., 1700 Palm Beach Lakes Boulevard, Suite 1100, West Palm Beach, Florida 33401.
4. The name and business address of the General Partner is National Lien Management, Inc., 1700 Palm Beach Lakes Boulevard, Suite 1100, West Palm Beach, Florida 33401.
5. The mailing address of the Partnership is 1700 Palm Beach Lakes Boulevard, Suite 1100, West Palm Beach, Florida 33401.
6. The latest date upon which the Partnership shall dissolve is no later than December 31, 2045, unless the Partners agree to extend the term.
7. This Certificate shall be effective upon the filing of this Certificate with the State of Florida, Department of State.

This Certificate is duly executed and is being filed in accordance with section 620.108 of the Florida Revised Uniform Limited Partnership Act (1986).

The execution of this Certificate by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the General Partner of National Lien Management, Ltd. this 22nd day of Sept, 1995.

By: 

Richard A. Heitmeyer, President of
National Lien Management, Inc.,
General Partner

SECRET
DIVISION OF REVENUE
95 SEP 25 PM 4:03
FBI - MIAMI

AFFIDAVIT OF CAPITAL CONTRIBUTION

STATE OF FLORIDA

COUNTY OF PALM BEACH

I, RICHARD A. HEITMEYER, as President of National Lien Management, Inc., which corporation is the General Partner of National Lien Management, Ltd., a Florida limited partnership, hereinafter referred to as the "Partnership," being duly sworn, certifies as follows:

1. The anticipated amount of capital contributions to the Partnership to be made by its Limited Partners is \$500,000.00.

Under penalties of perjury I declare that the foregoing facts are true to the best of my knowledge and belief.

Dated: September 22, 1995.

By: 

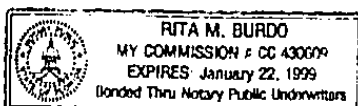
Richard A. Heitmeyer, President of
National Lien Management, Inc.,
General Partner

STATE OF FLORIDA
COUNTY OF PALM BEACH

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared RICHARD A. HEITMEYER, in his capacity as President of National Lien Management, Inc., the General Partner of National Lien Management, Ltd., known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contribution, and he acknowledged to me and before me that he executed this Affidavit freely and voluntarily for the purposes therein expressed.

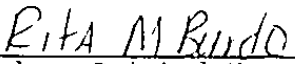
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the county and state aforesaid this 22nd day of September, 1995.

[SEAL]




Notary Public

State of Florida, at Large


Typed or Printed Name of Notary

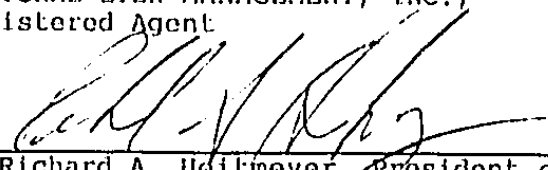
SECRET
DIVISION OF CORPORATIONS
FILED
95 SEP 25 PM 4:03

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as Registered Agent for National Lien Management, Ltd., a Florida limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of the registered agent.

NATIONAL LIEN MANAGEMENT, INC.,
Registered Agent

By:


Richard A. Heilmeyer, President of
National Lien Management, Inc.,
General Partner

NatLien.CLP

FILED
CLERK OF STATE
CORPORATIONS
JAN 25 1985
PM 4:03

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
Sandra Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 JAN 26 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership
National Lien Management LTD

1a. DOCUMENT #
A95000001435

DO NOT WRITE IN THIS SPACE

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
1700 Palm Beach Lakes Blvd. Suite 1100
West Palm Beach, FL 33401

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a.

3. Date Formed or Registered to Do Business in
FLORIDA
Sept. 25, 1995

3a. Date of Last Report

4. State or Country of Formation

Palm Beach County

5a. Capital Contributions as Shown
on Record
500,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. FEI Number

65-0627914

Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED ☐

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5a or 5b if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2.) Supplemental Fee: \$136.75 (pursuant to Section 607.103, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$136.75) AND NO MORE THAN \$576.25 (\$437.50 + \$136.75)
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.

FD 1576.25
136.75
576.25

9. Name and Address of Current Registered Agent

National Lien Management Inc. (R.H.)
1700 Palm Beach Lakes Blvd. Suite 1100
West Palm Beach, FL 33401

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

National Lien Management, Inc
1700 Palm Beach Lakes Blvd.
Suite

1700 Palm Beach Lakes
Suite 1100

West Palm Beach, FL
33401

95000019507

400001702224
-01/31/96--01031--01
****437.50 ****437.50

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

DATE

A 95000001435

1201 HAYS STREET
TALLAHASSEE, FL 32301
(904) 222-9100
(904) 222-0100 FAX



ACCOUNT NO. : 0721000000032
REFERENCE : 916705 J53408A
AUTHORIZATION : Patricia Pyzdek
COST LIMIT : \$ 35.00

FILED
96 APR 12 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : April 12, 1996

ORDER TIME : 11:01 AM

ORDER NO. : 916705

CUSTOMER NO: 153408A

800001778528

CUSTOMER: Ms. Linda Davis
Capital Asset Research
Suite 1100
1700 Palm Beach Lakes Blvd.
West Palm Beach, FL 33401

CHANGE OF AGENT

NAME: NATIONAL LIEN MANAGEMENT, LTD.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Debbie Skipper

RECEIVED
96 APR 12 PM 12:16
DIVISION OF CORPORATION

PAID
CSC
4-12

Florida Department of State, Jim Smith, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508,
Florida Statutes, the undersigned corporation 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.

1a. The name of the corporation is: National Lien Management, LTD.

1b. Date of Incorporation 09/25/1995 Document number A95000001435

2. The name and address of the current registered agent and office:

National Lien Management, Inc.

1700 Palm Beach Lakes Blvd., Suite 1100 West Palm Beach, FL 33401

3. The name and address of the new registered agent and office:

(P.O. Box Not Acceptable)

CORPORATION SERVICE COMPANY

1201 Hays Street, Tallahassee, Florida 32301

The street address of its registered agent and the street address of the business office
of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by
an officer so authorized by the board.

[Signature]
3/19/96
SIGNATURE
DATE

R.A. HEITMEYER - President
Typed or printed name and title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF
PROCESS FOR THE ABOVE STATED CORPORATION 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 COM-
PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT
THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

Corporation Service Company
Laura R. Dunlap, as Agent
SIGNATURE [Signature]
(Registered Agent)
DATE 4-12-96

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

CIOETA FAMILY LIMITED PARTNERSHIP
3120 NORTH 46TH AVENUE
HOLLYWOOD, FLORIDA 33021
(954) 982 - 0700

A95000002016

April 17, 1996

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

re: Cioeta Family Limited Partnership
A95000002016

Attn: Brenda Tadlock, Senior Administrator

✓ Dear Ms. Tadlock:

✓ With regard to the return of our 1996 Annual report and check (see attached correspondence) we believe that this may not be correct. We have no record of a prior filing of the 1996 annual report in January, 1996.

✓ As you discussed with our C.P.A., Louis Claps, yesterday, enclosed is a check for \$ 1.00 for a copy of the 1996 Annual Report you show as filed for us. In the event that this filing is incorrect we will inform your office and refile the 1996 Annual Report.

✓ Thank you for your assistance and cooperation in this matter.

Sincerely,


Antonio Cioeta, General Partner

000001732410
-04/24/96--01043--010
*****1.00 *****1.00

