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TALLAHASSEE, FL 32301

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904-222-9071

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A 950000001466

FILED
STATE OF
FLORIDA
CLERK OF
COURT
PH 3-55

ACCOUNT NO. : 022100000012

REFERENCE : 003075 0167A

AUTHORIZATION : Patricia Pujols

COST LIMIT : \$ 796.25

ORDER DATE : September 28, 1995

ORDER TIME : 9:43 AM

ORDER NO. : 003075

CUSTOMER NO: 0167A

CUSTOMER: Ronald A. Burgeon, Legal Asst.
NASON GILDAN YEAGER AND
GERSON, P.A.
Suite 1200
1645 Palm Beach Lakes Blvd.
West Palm Beach, FL 33401

File second

000001584855

DOMESTIC FILING

NAME: PELICAN POINTE WEST ASSOCIATES
LTD.

ARTICLES OF INCORPORATION

XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- XX CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: LORI R. LINDLEY

LEARN MORE INITIALS

9/28/95
442
110

SECRET
DATE
09 SEP 28 PM 3:55

CERTIFICATE OF LIMITED PARTNERSHIP
OF
PELICAN POINTE WEST ASSOCIATES, LTD.,
a Florida limited partnership

The undersigned general partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, certifies as follows:

1. Partnership Name. The name of the partnership is Pelican Pointe West Associates, Ltd. (the "Partnership").

2. Partnership Office and Mailing Address. The office of the Partnership and its mailing address are: 1645 Palm Beach Lakes Boulevard, Suite 1200, West Palm Beach, Florida 33401.

3. Name and Address of Registered Agent. The name and address of the registered agent of the Partnership are: Domenick R. Lioce, 1645 Palm Beach Lakes Boulevard, Suite 1200, West Palm Beach, Florida 33401.

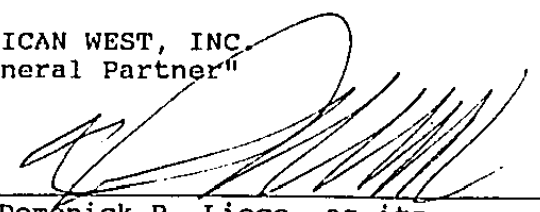
4. Name and Address of General Partner. The name and business address of the general partner are: Pelican West, Inc., 1645 Palm Beach Lakes Boulevard, Suite 1200, West Palm Beach, Florida 33401.

5. Dissolution. The latest date upon which the Partnership may dissolve is October 1, 2025.

6. Affidavit Regarding Capital. The affidavit regarding capital contributions is attached hereto.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the general partner of Pelican Pointe West Associates, Ltd., this 26th day of September, 1995.

PELICAN WEST, INC.
"General Partner"

By: 

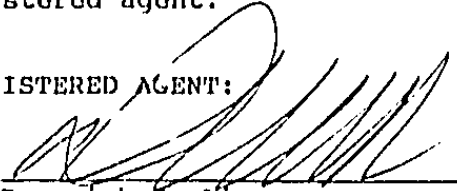
Domenick R. Lioce, as its
President

(SEAL)

ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

Having been named as registered agent for Pelican Pointe West Associates, 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 registered agent.

REGISTERED AGENT:

By: 
Domenick R. Lloce

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 SEP 28 PM 3:55

AFFIDAVIT REGARDING CAPITAL CONTRIBUTIONS

SECRET FILED STATE
DIVISION OF INVESTIGATIONS
95 SEP 28 PM 3:55

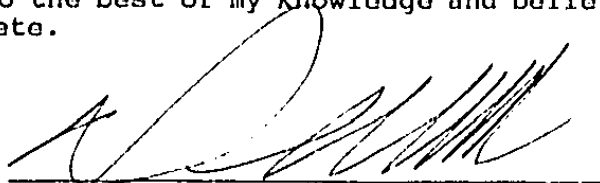
BEFORE ME, the undersigned authority, personally appeared Domenick R. Lioce, affiant herein, who being sworn on oath deposes and says:

1. I am the President of Pelican West, Inc., the general partner of Pelican Pointe West Associates, Ltd., a Florida limited partnership (the "Partnorship").

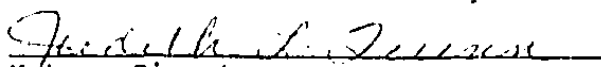
2. The limited partners of the Partnership have contributed capital in the sum of \$100,000.

3. The limited partners of the Partnership anticipate the amount to be contributed is a maximum of \$-0-.

4. Under penalties of perjury, I declare that I have examined this Affidavit, and to the best of my knowledge and belief it is true, correct and complete.


Domenick R. Lioce

SWORN TO AND SUBSCRIBED before me this 26th day of September, 1995, by Domenick R. Lioce, who is personally known to me OR who produced _____ as identification and who did not take an oath.

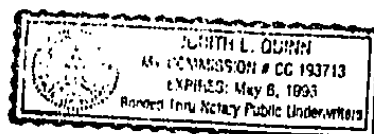

Notary Signature

Print Notary Name

NOTARY PUBLIC
State of Florida at Large

My Commission Expires:

11-144278-17 EDRN RAD



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
TALLAHASSEE, FLORIDA 32304-0001
TELEPHONE (904) 493-0001
FAX (904) 493-0002

FILED

95 NOV 17 PM 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1a. DOCUMENT #
A95000001466

96-A B

Polican Pointo West Associates, Ltd.

C M

My Address: c/o Domenick R. Lioce
1645 Palm Beach Lakes Blvd.
#1200
West Palm Beach, FL 33401

My Office Address: c/o Domenick R. Lioce
1645 Palm Beach Lakes Blvd.
#1200
West Palm Beach, FL 33401

3. Date of Filing: 09/28/95

3a. Date of Report:

4. State of Filing: Florida

5a. Total Capital: \$100,000

5b. Total Liabilities: \$100,000

6. Filing Number: 65-0609802

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 5a or 5b of this form, 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 \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75).
Note: If the amount entered in 5a is greater than amount entered in 5b, 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

Domenick R. Lioce
1645 Palm Beach Lakes Boulevard, Suite 1200
West Palm Beach, FL 33401

10. Registered Agent's Registered Agent Office

Name:
Street Address (P.O. Box Not Permitted):
State: Apt. #:
City: FL Zip Code:

10a. Pursuant to the provisions of sections 620.1051 and 620.1052, 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, to 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 sections 620.1052, 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):
Pelican West, Inc.

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers):
c/o Domenick R. Lioce
1645 Palm Beach Lakes
Boulevard

11b. City, State & Zip Code:
West Palm Beach, FL
33470

11c. Registration
Document Number:
P95000074979

300001644379
-11/22/95--01085--002
****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, the undersigned, certify that the information submitted with this filing is true and correct, and that I am qualified to file the information on behalf of the partnership. I understand that the information submitted is subject to the provisions of sections 620.1051 and 620.1052, Florida Statutes, and that the information submitted is subject to the provisions of sections 620.1051 and 620.1052, Florida Statutes. I understand that the information submitted is subject to the provisions of sections 620.1051 and 620.1052, Florida Statutes. I understand that the information submitted is subject to the provisions of sections 620.1051 and 620.1052, Florida Statutes.

SIGNATURE

Domenick R. Lioce

DATE: November 15, 1995

Telephone Number: (407) 686-3307

CR2E003 (6/95)