

1200 HAYS STREET
TALLAHASSEE, FL 32301

800-342-B0B6

901-222-0171
901-222-0172

A95000001471



ACCOUNT NO. : 072100000012

REFERENCE : 004000 1487A

AUTHORIZATION :

COST LIMIT : SPREPAID

ORDER DATE : September 29, 1995

ORDER TIME : 9:51 AM

ORDER NO. : 004000

CUSTOMER NO: 0487A

CUSTOMER: Mr. Layla Wright
1 CARD MERRILL CULLIS TIMM
FUREN & GINSBURG, PA
2033 Main Street, Suite 600
P. O. Drawer 4125
Sarasota, FL 34237

G. TAA _____
FILING _____ 1085.00
2. AGENT FEE _____ 36.00
3. COPY _____ 52.50
TOTAL _____ 1173.50
4. BANK _____
BALANCE DUE _____
REFUND _____

DOMESTIC FILING

NAME: WELLER NOPO, LTD.

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lori R. Dunlap

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF
95 SEP 29 PM 1:37

800001603698
-10/09/95--01019--017
*****35.00 *****35.00

800001603698
-10/09/95--01019--018
***1137.50 ***1137.50

9/29/95
RLC

CERTIFICATE OF LIMITED PARTNERSHIP
OF
WELLER NOKO, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 SEP 29 PM 1:37

The undersigned, desiring to form a limited partnership pursuant to Section 620.108 of the Florida Statutes, hereby certifies as follows:

1. The name of the partnership is "Weller Noko, Ltd.".
2. The initial registered office of the partnership is 2033 Main Street, Suite 600, Sarasota, Florida, 34237. The name of its initial registered agent is Icard, Merrill, Cullis, Timm, Furen & Ginsburg, P.A.; Attn.: Michael L. Foreman.
3. The name and business addresses of the general partner is:

Noko, Inc.
312 Sunrise Drive
Nokomis, Florida 34275

4. The mailing address for the limited partnership and its principal place of business in the State of Florida is 312 Sunrise Drive, Nokomis, Florida, 34275.

5. The latest date upon which the limited partnership is to dissolve shall be December 31, 2055.

IN WITNESS WHEREOF, the parties hereto have signed this 28th day of September, 1995.

GENERAL PARTNER:

NOKO, INC.

By: _____

Richard Weller, Its
President

STATE OF FLORIDA
COUNTY OF SARASOTA

I HEREBY CERTIFY that before me, the undersigned authority, duly authorized in the state and county named above to administer oaths, personally appeared RICHARD WELLER, as President of NOKO, INC., a Florida corporation, who is personally know to me or produced _____ as identification,

and who executed the foregoing instrument and acknowledged that he executed the same on behalf of said corporation.

WITNESS my hand and official seal in the state and county last aforesaid this 28 day of September, 1995.

Lynne Foreman
Notary Public



LYNNE FOREMAN
MY COMMISSION # 00124
August 1, 1996

Typed, Printed or Stamped Name
of Notary

LYNNE FOREMAN

My Commission Expires:

FILED STATE
SECRETARY OF CORPORATIONS
95 SEP 29 PM 1:37

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for WELLER NOKO, LTD., a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, MICHAEL L. FOREMAN, as an authorized agent of ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, P.A., on behalf of the Partnership hereby agrees to accept service of process for said Partnership and to comply with any and all statutes relative to the complete and proper performance of all duties of registered agent.

Witnesses:

Lynne Foreman
(Signature of Witness)

LYNNE FOREMAN
(Printed Name of Witness)

Joanne M. Hornauer
(Signature of Witness)

Joanne M. Hornauer
(Printed Name of Witness)

REGISTERED AGENT:

ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, P.A.

By: Michael L. Foreman
MICHAEL L. FOREMAN, I.C.
Authorized Agent

FILED STATE
SECRETARY OF CORPORATIONS
SEP 29 PM 1:37

STATE OF FLORIDA
COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me this 29 day of September, 1995, by MICHAEL L. FOREMAN as an authorized agent of ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, P.A., the Registered Agent, who is personally known to me or who has produced _____ as identification.

Lynne Foreman
Notary Public LYNNE FOREMAN
MY COMMISSION # CC396876 EXPIRES
August 1, 1998
Typed, Printed or Stamped Name
of Notary

Commission Expires:

AFFIDAVIT OF CONTRIBUTION BY LIMITED PARTNERS

FILED STATE
DIVISION OF CORPORATIONS
95 SEP 29 PM 1:37

BEFORE ME, the undersigned authority personally appeared RICHARD WELLER who is the President of NOKO, INC., the sole general partner of a certain Limited Partnership known as "WELLER NOKO, LTD.", and who being first duly sworn deposes and says:

1. This affidavit is made pursuant to Section 620.108(1), Florida Statutes.

2. The capital contributions of the limited partners to the limited partnership are One Hundred Fifty-Five Thousand Dollars (\$155,000.00). No additional amounts are currently anticipated to be contributed by the limited partners.

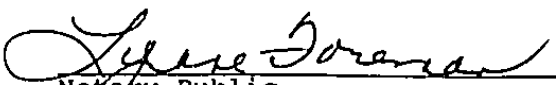
FURTHER AFFIANT SAYETH NOT.


Richard Weller

STATE OF FLORIDA
COUNTY OF SARASOTA

I HEREBY CERTIFY that before me, the undersigned authority, duly authorized in the state and county named above to administer oaths, personally appeared RICHARD WELLER, who is personally known to me or produced as identification, and who swore to and subscribed the foregoing instrument and acknowledged that he executed the same.

WITNESS my hand and official seal in the state and county last aforesaid this 28th day of September, 1995.


Notary Public



LYNNE FOREMAN
MY COMMISSION # CC396876 EXPIRES
August 1, 1998

Typed, Printed or Stamped Name
of Notary

My Commission Expires:

WELLER\AFFIDAVI

A95000001471

OFFICE USE ONLY (Document #)

Weller Noko, LTD.
(Requestor's Name)
312 Sunrise Dr.
(Address)
Nakomis, IL 34275
(City, State, Zip) (Phone #)

OFFICE USE ONLY

FILED
55 DEC 26 PM 12:24
SECRET
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (If known):

1. Weller Noko, LTD. (Corporation Name) 800001680918 (Document #)
-01/05/96--01113--019
****716.25 ****140.00
2. A95000001471 (Corporation Name) (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

FF. \$140.00

1-4-96 aw



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of WELLER NOKO, LTD.

Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 175,000.00

This 7th day of December, 19 95

FURTHER AFFIANT SAYETH NOT.

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

General Partner(s)

Richard N Weller

FEES:

\$7 per \$1,000 based on the additional contributions
(Minimum \$52.50 - Maximum \$1,750.00)

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

A 95000001471

FILED

95 DEC 26 PM 12:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT #
A95000001471

WELLER NOKO, LTD.

2. Filing Fee
8000001680918
-01/05/96--01113--019
****716.25 ****576.25

312 Sunrise Drive
Nokomis, FL 34275

Same

3. FLORIDA 9/29/95
3a. None - New
4. Florida

5a. \$155,000.00
5b. \$175,000.00
6. 65-0613910

7. CERTIFICATE OF STATUS REQUIRED
\$5.75 Additional Fee required
for a Certificate of Status

6. 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 \$62.50 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 (\$62.50 + \$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
Icard, Merrill, Cullis, Timm, Furen
& Ginsburg, P.A.
Attention: Michael L. Foreman
2033 Main St., Ste. 600
Sarasota, FL 34237

10. If changed from Registered Agent Office
Name
Street Address (P.O. Box Number is Not Accepted)
Suite, Apt. # etc.
City FL Zip Code

10a. This and 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, submit to 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 this appointment of registered agent and assume with and accept the obligations of section 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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Number)	11b. City, State & Zip Code	11c. Registered Document Number
Noko, Inc., a Florida corporation	312 Sunrise Drive	Nokomis, FL 34275	P95000074764
AR - \$437.50 SF \$138.75 1-4-96a			

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I, the undersigned, being duly qualified, do hereby certify that the foregoing information is true and correct to the best of my knowledge and belief, and that the same has been verified by me or by some other person or persons known to me to be duly qualified to verify the same.

SIGNATURE By: Richard Weller, Its President

DATE Nov 8, 1995
(941) 923-2469

CR2E003 (6/95)

10/01/97

NUM: A9500001471

LAST: BUNION CHANG

ACT CNT: 75,000.00

NAME: WELLES NOKO, LT

PRINCIPAL: 312 SUNRISE DRIVE

ADDRESS: NOKOMIS, FL 34275

RA NAME: FOREMAN, MICHAEL L

RA ADDR: C/O ICARD, MERRILL, ET AL
2033 MAIN STREET, SUITE 600

SARASOTA, FL 34237 US

ANN REP:

(1996) I 12/26/95

(1997) I 11/21/96

1. MENU, 3. PARTNERS, 4. EVENTS

ENTER SELECTION AND CR:

97 SEP 30 AM 10:53

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

900002310309--7
-10/02/97--01096--013
****760.40 ****219.15

A95-1471

Name	AL
Availability	AL
Document	AL
Examiner	AL
Updater	AL
Updater	AL
Verifier	AL
Acknowledgement	AL
W. P. Verifier	AL

ff \$219.15



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP

The undersigned general partners of Weller Noko, Ltd

_____, a
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 206,307.00.

This 20th day of September, 19 97.

FURTHER AFFIANT SAYETH NOT.

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

General Partner(s)

Noko, Inc., by Richard N Weller, its President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 SEP 30 AM 10:53

FEES:

\$7 per \$1,000 based on the additional contributions
(Minimum \$52.50 - Maximum \$1,750.00)