

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-8870

Mailing Address: Post Office Box 1000, Tallahassee, FL 32302

Tel. (904) 222-8852

FAX (904) 222-8852

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

Handwritten: 10/11/95
C. COX
FILING 175.00
P. AGENT FEE 32.00
C. COPY 52.50
TOTAL 1846.25
N. BANK
BALANCE DUE
OFFICE

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE			
TIME			CK No.
BY	<i>AAK</i>		

WALK-IN
Will Pick Up *10/11 1200*

RE: *Armed & Dangerous*

Large Handwritten: A95000001526

	C.C. FEE.	DISBURSED
Capital Express™		
Art. of Inc. File		
Corp. Record Search		
Ltd. Partnership File		
Foreign Corp. File		
() Cert. Copy(s)		
Art. of Amend., File		
Dissolution/Withdrawal		
C U S- <i>95</i>		
Fictitious Name File		
Name Reservation		
Annual Report/Reinstatement		
Reg. Agent Service		
Document Filing		
Corporate Kit		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC 1 or 3 File		
UCC 11 Search		
UCC 11 Retrieval		
File No.'s, Copies		
Courier Service		
Shipping/Handling		
Phone ()		
Top Priority		
Express Mail Prep.		
FAX () pgs.		

SUBTOTALS	
FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection

LAW OFFICES
HONIGMAN MILLER SCHWARTZ AND COHN

A PARTNERSHIP INCLUDING PROFESSIONAL ASSOCIATIONS

390 NORTH ORANGE AVENUE

SUITE 1300

POST OFFICE BOX 2471

ORLANDO, FLORIDA 32802-2471

TELEPHONE (407) 648 0300

TELECOPIER (407) 648 1155

SHELLEY K. GRAHAM
Legal Assistant

October 10, 1995

WEST PALM BEACH, FLORIDA
TAMPA, FLORIDA
DETROIT, MICHIGAN
LANSING, MICHIGAN
HOUSTON, TEXAS
LOS ANGELES, CALIFORNIA

VIA: HAND DELIVERY

Secretary of State
Post Office Box 6327
Tallahassee, FL 32304

Re: Arrowhead Associates, Ltd.

Dear Sir:

Enclosed please find the following documents to be filed with the secretary of State's Office upon your receipt of this package:

Certificate of Limited Partnership of Arrowhead Associates, Ltd.; and
Affidavit of Capital Contributions.

A check in the amount of \$1,846.25 is also enclosed to cover the following:

Filing Fee (maximum)	\$1,750.00
Registered Agent Designation	35.00
Certified Copy	52.50
Certificate of Status	<u>8.75</u>

TOTAL \$1,846.25

Thank you for your assistance.

Very truly yours,

HONIGMAN MILLER SCHWARTZ AND COHN

Shelley K. Graham

Shelley K. Graham
Legal Assistant

SKG/wyd
Enclosures
ORLANDO/53421 1

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT 11 AM 10:32

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
ARROWHEAD ASSOCIATES, LTD.**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT 11 AM 10:32

The undersigned, desiring to form a limited partnership pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act, hereby states the following:

1. Name of Limited Partnership. The name of the limited partnership is:

Arrowhead Associates, Ltd.
(the "Partnership")

2. Address of the Partnership. The office address of the Partnership is located at:

600 South Orange Avenue
Suite 202
Maitland, Florida 32751

3. Registered Agent and Office. The name and address of the registered agent of the Partnership for service of process pursuant to Section 620.105, Florida Statutes, are:

Jean Pierre Cuenant
600 South Orange Avenue
Suite 202
Maitland, Florida 32751

4. Name and Address of the General Partner. The name and address of the sole General Partner of the Partnership are:

JPC Development Corporation
600 South Orange Avenue
Suite 200
Maitland, Florida 32751

599 213

5. Mailing Address of the Partnership. The mailing address of the Partnership is:

600 South Orange Avenue
Suite 200
Maitland, Florida 32751

6. Effective Date of Limited Partnership. The effective date of the Partnership shall be the date it is filed with the Secretary of State of Florida.

7. Dissolution of the Partnership. The latest date upon which the Partnership is to dissolve is December 31, 2002.

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

IN WITNESS WHEREOF the undersigned has executed this Certificate of Limited Partnership this 10th day of October, 1995.

JPC DEVELOPMENT CORPORATION
a Florida corporation, sole General Partner

By: J. P. Cuenant
Jean Pierre Cuenant, President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT 11 AM 10:32

ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP, AT THE PLACE DESIGNATED IN NUMBER 3 OF THIS CERTIFICATE OF LIMITED PARTNERSHIP, THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF PARTNERSHIP DUTIES.

Dated this 10th day of October, 1995.

J. P. Cuenant
Jean Pierre Cuenant

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA
COUNTY OF ORANGE

BEFORE ME, the undersigned notary public, personally appeared Jean Pierre Cuenant, President of JPC Development Corporation, a Florida corporation, the sole general partner of Arrowhead Associates, Ltd., a Florida limited partnership (the "Partnership"), whose business address is 600 S. Orange Avenue, Suite 202, Maitland, Florida 32751, who, upon being duly sworn, certified on behalf of the Partnership the following:

1. The amount of capital contributions to the Partnership made by the limited partners is \$1,130,000.00.
2. The amount of anticipated to be contributed by the limited partners is \$-0-.

FURTHER AFFIANT SAYETH NOT.

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

Dated: October 10, 1995.

Sole General Partner:

JPC DEVELOPMENT CORPORATION
a Florida corporation

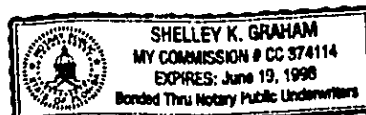
By: J. P. Cuenant
Jean Pierre Cuenant, President

Sworn to and subscribed before me this 10th day of October, 1995, by Jean Pierre Cuenant, as President of JPC Development Corporation, a Florida corporation, on behalf of the corporation. He is personally known or has produced _____ as identification.

NOTARY PUBLIC:

Sign: Shelley K. Graham
Print: Shelley K. Graham
State of Florida at Large
My Commission Expires: _____
Serial Number, if any: _____

(NOTARY SEAL)



FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$600 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Mortonham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 DEC 26 AM 9:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #
A95000001526

ARROWHEAD ASSOCIATES, LTD.

Mailing Address

Principal Office Address

2. Home Mailing Address, If Applicable

600 South Orlando Avenue

Suite, Apt., etc.

Suite 202

City, State & Zip

Maitland, FL 32751

2a. Home Principal Office Address, If Applicable

600 South Orlando Avenue

Suite, Apt., etc.

Suite 202

City, State & Zip

Maitland, FL 32751

3. Date Formed or Registered to Do Business in
FLORIDA
10/11/95

3a. Date of Last Report
N/A

4. State or Country of Formation
Florida

5a. Capital Contributions as Shown
on Record

\$1,130,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

\$1,130,000

6. FEI Number

X 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 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 607.103, 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 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

JEAN PIERRE CUENANT

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

600 South Orlando Avenue

Suite, Apt., etc.

Suite 202

City

Maitland

FL

Zip Code

32751

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 further 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)

JPC Development Corporation

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

600 South Orlando
Avenue, Suite 202

11b. City, State & Zip Code

Maitland, FL 32751

11c. Registration
Document Number

J99213

800001677898
-01/04/96--01020--042
****576.00 ****576.00

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 effects 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

JEAN PIERRE CUENANT, President of JPC Development Corporation

Typed or Printed Name of General Partner Signing Form

Telephone Number (407)-644-6319

CR2E003 (6/95)