

Florida Department of State Division of Corporations Post Office box 6327 Tallahassee, Florida 32314

Bellwood Partners, Ltd.

Dear Sir/Madame:

October 19, 1995

Enclosed please find Certificate of Limited Partnership for Bellwood Partners, Ltd, along with the Affidavit of Capital Contributions and Acknowledgement of Registered Agent.

Also enclosed is check in the amount of \$140.00 for filing fee.

Sincerely,

C. Frederick Thompson For Bellwood Partners, Ltd.

Enclosures

CFT/jld

800001621998 -10/27/95--01015--013

\*\*\*\*140.00 \*\*\*\*140.00

Name 10/24/ Armidistry de	
Positivint Exercise	
Updater	
Updater Vantyer	DCC
Cotine tourent	LICC
A Charles Nor	JUB

A95000001603

R. ACTIVITY FEE N. 4.3. 13 BALANCE DUE REFUND

**Lirst Union Bank Building** 104 N. Main Street Suite 300 Gainesville, Horida 32601 lelephone: 904/378-4814 Facsimile: 904/335-2905

C. TAX.\_\_

00.0P1 2003R

#### CERTIFICATE OF LIMITED PARTNERSHIP

OF

### BELLWOOD PARTNERS, LTD.

Pursuant to the authority of Section 620.108, Florida Statutes, the undersigned, constituting the sole general partner of BELLWOOD PARTNERS, LTD. (the "Partnership") hereby submits the following in connection with the formation of the Partnership:

- The name of the Partnership shall be BELLWOOD PARTNERS, LTD.
- The address of the office where records shall be kept shall be 104 N. Main Street, Suite 300, Gainesville, Florida 32601. The name and address of the registered agent for service of process is C. Frederick Thompson, 104 N. Main Street, Suite 300, Gainesville, Florida 32601.
  - The name and business address of the general partner is: 3. Thompson Property Management Corporation 104 N. Main Street, Suite 300 Gainesville, Florida 32601
- 4. The mailing address of the limited partnership is 104 NM Main Street, Suite 300, Gainesville, Florida 32601.
- The latest date upon which the Partnership is to dissolve shall be December 31, 2045.

This Agreement has been executed by the undersigned this 19th day of October, 1995.

GENERAL PARTNER

Thompson Property Management Corporation

C. Frederick Thompson, President

#### AFFIDAVIT

OF

#### CAPITAL CONTRIBUTIONS

The undersigned being the sole general partner of BELLWOOD PARTNERS, LTD., and being duly sworn does hereby set forth the following for the purpose of accompanying the filing of the Certificate of Limited Partnership of BELLWOOD PARTNERS, LTD. with the Florida Department of State, as required by Section 620.108, Florida Statutes:

The amount of capital contributions of the limited partners as of the date hereof is \$50.00 and no further capital contributions from the limited partners are reasonably anticipated at this time.

This Affidavit is executed and sworn to by:

General Partner:	7 <u>4</u> 7	1995	
Thompson Property Management Co	rpora	t <b>⊈</b> pı	n
By: _ / Moh Af Man	<i>第</i> 正 -m.	T 20	
C. Frederick Thompson, Pres	ident	₹	0
	AIK AIK	÷ 0(	

STATE OF FLORIDA

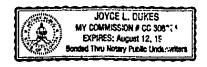
COUNTY OF ALACHUA

The foregoing instrument was acknowledged before me this 19th day of October, 1995, by C. Frederick Thompson, as President of Thompson Property Management Corporation, General Partner, and who is personally known to me, in that capacity.

Notary Public

My Commission Expires:

Print, type or stamp name of notary



## ACKNOWLEDGEMENT OF REGISTERED AGENT

Having been designated as Registered Agent for BELLWOOD PARTNERS, LTD., the undersigned hereby accepts the designation and agrees to act as the Registered Agent of said limited partnership and states that he is familiar with his statutory obligations as such.

C. Frederick Thompsop

Dated this 19th day of October, 1995.

SECRETATION STATE

# FILE ON OR BEFORE DICEMBER 31, 1985 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE



1. Hame / Emiles Partnership		1a. [		ry of State CORPORATIONS  MENT #	7 -	777	PM 3: 59 OF STATE E. FLORIDA		
BELLMOOD PARTNERS	, LTD.	<u> </u>					NOT WRITE IN THIS		
Making Audruss  104 N. MAIN ST.  104 N. MAIN ST.			MAIN ST.		Suite, Apt #	etc			
Suite 300 Gainesville, pl 32	2601	SUITE 3			Cay. State & Zip  28. New Principal Office Address # Applicable				
bovo addresses are succerect in any wa	#x fine thiough the in				Suite. Apl #		Address in experience	Die	<del></del> -
But Formed or Registered to Do But FLORIDA 10/20/1995	siness in 3a.	Date of Last Report		dress in Block 2.5 infor 2a. Country of Formation	City. State &			<u> </u>	<del></del>
Capital Contributions as Shown on Record	5b. Amount of	* Capital Contributions in to date		omber		Applied For	7. CERTIFICAT	E OF STATUS R	LONYED [
\$50.00 FEES: 1.) Filing Fee: Computed at 2.) Supplemental Fee: \$138	<u> </u>	<u></u>	APPL	IED FOR	- -	Not Applicable			
HOMPSON, C. FREDE DA N. MAIN ST. JITE 300			ļ	Street Address (P O Bo	x Number is N	of Acceptable)			
WINESALITIE, M. 35	601		ı	Suite. Apt. #, etc.					
<ul> <li>Pursuant to the provisions of sector for the purpose of changing its reg agent. I am familiar with, and acce</li> </ul>	ons 620 1051 and 620 g-stared office or regis ept the obligations of s	section 620 192, Florida	the above-named the State of Floric Statutes	City	wed or registeri orwed by its ge	nd under the law noral partner(s)	FL ws of the State of Fic ) Thereby accept th	Zip Code  Orida submits the appointment of	s statement i registered
Pursuant to the provisions of sector for the purpose of changing its register. I am familiar with, and account for the purpose of changing its registered Agent Accounting A GENERAL PARTNE	cons 620 1051 and 620 gistered effice or regis epit the obligations of s	SA CORPORA BE REGISTE	ATION, LI	Gity  d imited parinership organida Such change wits authorities  IMITED PARTIN  ACTIVE WIT	NEDCHI	BOR OT	ws of the State of Fic 1 Thereby accept th DATE	orida submits the ne appointment of	if registered
Pursuant to the provisions of sector for the purpose of changing its regagent. Lam familiar with, and account ATURE, Registered Agent Accounting A GENERAL PARTNE Name(s) of General Partner(s).	cons 620 1051 and 620 gestered office or regis ept the obligations of s Appointment)  ER THAT (S  MUST E	A CORPORE BE REGISTE 11a. (Do NOT Use	ATION, LI	d imited partnership organical Such charge wits authorized PARTN ACTIVE WITH	NERSHII H THIS (	BOR OT	ws of the State of Fic 1 Thereby accept th DATE	orida submils the appuintment of INESS EI	NTITY
Pursuant to the provisions of sector for the purpose of changing its regagent. Lam familiar with, and account ATURE, Registered Agent Accounting A GENERAL PARTNE Name(s) of General Partner(s)	cons 620 1051 and 620 gestered office or regis ept the obligations of s Appointment)  ER THAT (S  MUST E	A CORPORE BE REGISTE 11a. (Do NOT Use	ATION, LI	Gity  distributed partnership organical Such change was authorised and Such change was a such ch	NERSHII H THIS (	P OR OT OFFICE. * Zp Code FL 326	DATE	INESS EI  Registral Document N	NTITY  vary lumber
Parsuant to the provisions of sector for the purpose of changing its regagent. I am familiar with, and account ATURE, Registered Agent Accepting A GENERAL PARTNE  Name(s) of General Partner(s)  HORPSON PROPERTY IN	cons 620 1051 and 620 gestered office or regis ept the obligations of s Appointment)  ER THAT (S  MUST E	A CORPORE BE REGISTE 11a. (Do NOT Use	ATION, LI	Gity  distributed partnership organical Such change was authorised and Such change was a such ch	NERSHII H THIS (	P OR OT OFFICE. * Zp Code FL 326	ws of the State of Fic ) I hereby accept th DATE	INESS EI  Registral Document N	NTITY  vary lumber
NATURE, Registered Agent Accepting A A GENERAL PARTNE  Name(s) of General Partner(s)  RORIPSON PROPERTY IN	ons 620 1051 and 620 gestered office or regis opt the obligations of s Appointment)  ER THAT !S MUST E	A CORPOR BE REGISTE  11a. (DO NOT US  104 N. MA	ATION, LI RED AND S OF EACH GENERAL SEP POST Office Bo-	d limited partnership organical Such charge wits authors Such charge wits authors ACTIVE WITH Numbers 11b.  GAINES	NERSHII H THIS ( City. State SVILLE,	P OR OT OFFICE. A Zip Code FL 3260 -12/ ***	DATE  THER BUSI  11c.  101 P95  100011  P95  111.  112.  113.  113.  114.  115	INESS EI  Registrati Document N  50000009  65571 1012U(1)  ****191	NTITY orv lumber 010 35

C. PREPERICK THOMPSON, PRESIDENT

904-378-4814 \*elephone Number