

ACCOUNT NO. : 072100000032

REFERENCE: 723263

AUTHORIZATION :

COST LIMIT : \$ 1,837.50

ORDER DATE: November 2, 1995

ORDER TIME : 11:36 AM

ORDER NO. : 723263

CUSTOMER NO: 80349A

CUSTOMER: J. Michael Hartenstine, Esq.

WILLIAMS PARKER HARRISON DIETZ

4 GETZEN

P.o. Box 3258

Sarasota, FL 34236

300001626753

DOMESTIC FILING

NAME:

PALHGARDEN RESORT, LTD.

ARTICLES OF INCORPORATION XXX CERTIFICATE OF LIMITED PARTNERSHIP PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis

EXAMINER'S INITIALS:

2 cy VVVVVVVVVVVVV



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 7, 1995

JENNIFER F. LUKAS WILLIAMS, PARKER, HARRISON, ET AL. 1550 RINGLING BLVD. SARASOTA, FL 34236

The name PALM GARDENS RESORT, LTD. has been reserved for 120 days beginning September 7, 1995. The reservation number is R95000004063 and this reservation is NONRENEWABLE.

A reservation is not a grant of authority to use the name. It is only a withholding of a name from its availability for use by another. When the proposed document is submitted, the name will AGAIN be checked against the records of the Division and if still no conflict exists and all other requirements are fulfilled, the reserved name shall be filed as the entity name.

The Division of Corporations is a ministerial filing office and may not render any legal advice. The Division does not adjudicate the legality of any corporate name or arbitrate disputes between entities. You may wish to review other laws such as common law rights, including rights to a trade name; United States Code, Federal Trademark Act, Section 1051 (Lantham Act); Chapter 495, Florida Statutes, Registration of Trademarks and Service Marks (Florida Trademark Act); and Section 865.09, Florida Statutes (Fictitious Name Act).

If someone else submits the document for filing, it must have a copy of this letter attached.

Should you have any questions regarding this matter, please telephone (904) 488-9000, the Name Availability Section

Becky McKnight

Letter number: 595A00041380

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

CERTIFICATE OF LIMITED PARTNERSHIP OF PALMGARDEN RESORT, LTD., A FLORIDA LIMITED PARTNERSHIP

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (1986) as set forth in Chapter 620, Part I, of the Florida Statutes, hereby states the following:

- 1. The name of the limited partnership is "Palmgarden Resort, Ltd."
- 2. The address of the office of the limited partnership is 3500 South Florida Avenue, Suite 2A, Lakeland, Florida 33803.
- 3. The name and address of the agent for service of process on the limited partnership is Transoceanic Holdings Corp. at 3500 South Florida Avenue, Suite 2A, Lakeland, Florida 33803.
 - 4. The name and business address of the General Partner is:

Transoceanic Holdings Corp.
3500 South Florida Avenue, Suite 2A
Lakeland, Florida 33803

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- 5. The mailing address of the limited partnership is 3500 South Florida Avenue, Suite 2A, Lakeland, Florida 33803.
- 6. The latest date upon which the limited partnership shall dissolve is December 31, 2010.

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 Palmgarden Resort, Ltd., this the <u>20</u> day of October 1995.

TRANSOCEANIC HOLDINGS CORP., a Florida corporation

By:

Uwe Kähler, Vice President

"General Partner"

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for Palmgarden Resort, Ltd., a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, the undersigned, on behalf of the Partnership, hereby agrees to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

TRANSOCEANIC HOLDINGS CORP., a Florida

corporation

Uwe Kähler, Vice President

"Registered Agent"

JLT/dcp-136755

SECRETARY OF STATE OF STATE OF COMPORATION

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA COUNTY OF SARASOTA

BEFORE ME, the undersigned authority, personally appeared Uwe Kähler, as Vice President of Transoceanic Holdings Corp., a Florida corporation, which is the General Partier of Palmgarden Resort, Ltd., a Florida limited partnership, hereinafter referred to as the "Partnership," who, upon first being duly sworn, certified as follows:

- 1. The amount of capital contributions to the Partnership of the Limited Partners is \$5000.
- 2. The amount of additional capital contributions anticipated to be contributed by the Limited Partners is \$5,000,000.

FURTHER AFFIANT SAYETH NAUGHT.

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

		lulle
		Uwe Kähler
who is personally k	nown to me or who has	ne this 20th day of October 1995 by Uwe Kähler, produced a s indicated, the above-named person is personally Signature of Notary Public
	AND NO. OF STREET	Print Name of Notary Public
	OFFICIAL NOTARY SEAL LIZABETH BERG MY COMM. EUP. 10-4-98 No. CC 411584	I am a Notary Public of the State of Florida, and my commission expires on

MANT OF SHORE	TO REVOC		D) PENALT						
LIMITED PARTNERSHIP ANNUAL REPORT 1996			ORIDA DEPARTN Sundra Mic Silicitatary C HVISION OF COR	ermam el Stato		FIL 950EC-4	·		
1. Name of Limited Parameteria	1a. C	1a. DOCUMENT #							
A95000001668				<u>-</u>	SECRETARY OF STATE TALLAHASSEE. FLORIDA				
· Palmgarden Reson	t, Ltd.					DO NOT W	RITE IN THIS SPA	CF	
				2. New M	2. New Maling Address: If Applicable				
Mailing Address		Principal Office Ad	dress	<u> </u>	Suite, Apt #	Suite, April 4, etc 100001654361			
3500 South Flori	da Ave.	35	00 South	Florida A	City. State &	Zp 単東東京		****576	
Ste. 2A			e. 2A keland, E	ரு 33803	2a. New	28. New Principal Office Address. If Applicable			
Lakeland, FL 33 If above addresses are incorrect in any way.			•		Suite Apt #	etc			· ·
3. Date Formud or Registered to Do Busin FLORIDA 11-2-95		Date of Last Report n/a		ountry of Formation	Gity: State &	Z·ρ			
5a. Capital Contributions as Shown on Record	5b. Amount of FLORIDA	Capital Contributions i to date	n 6. FCI Nu	mbur	х	Applied For 7.	CERTIFICATE O	F STATUS REQUIR	ED 🗌
\$5,000,000				<u></u>		Not Applicable			
8. FEES: 1) Filing Fee: Computed at 1 2.1 Supplemental Fee: \$138 THE AMOUNT DUE SHALL BE NO LESS TI Note: If the amount entered in 5b is MAKE CHECK PAYABLE TO FLORIDA DE	75 (pursuari lo soci HAN \$191 25 (\$52.5 greater than amoun PT, OF STATE.	ion 607,193, F.S.) iO + \$138.75) AND NO tentered in 5a, a suppl	MADE THAN SEZE	96 /\$437 NA + \$138 7	5) with a soperate a	nd appropriate filing fee	12.	5-8	
9. Name and Add				Name	10. #	10. If changed new Registered Agent/Office			
Transoceanic Ho. 3500 South Flor	ldings 🗠 ida Ave	rp. Suite 2A		Street Address (P C	Street Address (P.O. Box Number Is Not Acceptable)				
Lakeland, FL 3				Suite. Apt ≠. elc					
				Cdy FL Žip Code					
10a. Pursuant to the provisions of sector for the purpose of changing its reg agent. I am familiar with, and according (Rogistered Agent Accepting)	pstered office or rug pt the obligations o Appointment)	pstered agent, or both Esection 620 192. Flor	in the State of Flori ida Statutes	ida. Such change was	authorized by its	general partner(s) Th	the State of Flori ereby accept the	arpointinent regi	
A GENERAL PARTNE	R THAT IS MUST	S A CORPO BE REGIST	RATION, L ERED AN	IMITED PAI D ACTIVE V	KINEKSH VITH THIS	OFFICE.	EK BUSII	AE99 EU I	18.4
11. Name(s) of General Partner(s)		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)		Destroy		ate & Zip Code	11c.	Registration/ Document Numb	Det .
Transoceanic Holdi	ngs Corp.	1		Ave. La	keland,	FL 33803	33803 P95000081352		
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		<u></u>				4. 40			
Note: General partners 12. I do hereby certify that the information									ner.
Corporations from any liability of no this annual report is true and accura	n-compliance with S ste and that my sign		the event that the if ime legal effects as	skvensal on tunn felif.	acomea e lembi	IOM DUDIE ACCESS 13	THE COURT HAIL	THE REPORT AND PARTY	alled on or trustee

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)(4). Florida Statutes, I recase the Division of
	Committee with Section 119 07/30/bit in the avent that the information supplied elemed elemed element computer contry that the information supplied access 1 turner contry that the information supplied access 1 turner contry that the information supplied access 1 turner control to the information supplied access 1 turner control
	this annual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee
	empowered to execute his report of required by chapter 600. Florida Statutes
	SNATURE LAND DATE NOV 21. 85
SIG	SNATURE MAAVW

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Typed or Printed Name of General Partner Signing Form Transoceanic Holdings Corp.

BY: Use Kahler, Vice President

DATE NOV 21. 85 Telephor Number 941-644-9500