1201 Hays Street
Tallahassee, FL 32301
904-222-9171
800-342-8086

H95000001804

CSC networks
PRENTICE HALL LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 072100000032

REFERENCE : 743532 142159A

AUTHORIZATION :

COST LIMIT : $ PREPAID

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 NOV 22 PM 2:47

ORDER DATE : November 22, 1995

ORDER TIME : 10:41 AM

ORDER NO. : 743532

300001648903
-11/29/95--01075--013
***1785.00 ***1785.00

CUSTOMER NO: 142159A

CUSTOMER: Ms. Claudette L. Burdine
ROTH & SCHOLL

Suite 176
1500 San Remo Avenue
Coral Gables, FL 33146

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DIVISION OF CORPORATIONS

DOMESTIC FILING

NAME: TIGRESS LIMITED PARTNERSHIP

C. TAX
FILING 1755
R. AGENT FEE 30
C. COPY
TOTAL 1785
N. BANK
BALANCE DUE
RECEIVED

_____ ARTICLES OF INCORPORATION
XXXX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XXX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS: MM

11/22/95

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DIVISION OF CORPORATIONS
95 NOV 22 PM 2:47

CERTIFICATE OF LIMITED PARTNERSHIP
OF
TIGRESS LIMITED PARTNERSHIP

1. Tigress Limited Partnership
(Name of Limited Partnership)

2. 1001 South Bayshore Drive, Suite 2502, Miami, Florida 33131
(Business Address of Limited Partnership)

3. Mr. Daniel Bell
(Name of Registered Agent for Service of Process)

4. 1001 South Bayshore Drive, Suite 2505, Miami, Florida 33131
(Florida Street Address for Registered Agent)

5. _____
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)

6. The latest date upon which the Limited Partnership is to be dissolved is October 31, 2005.

7. NAMES OF GENERAL PARTNERS

Yina Chang
Yina Chang

SPECIFIC ADDRESS

2215 N. Illinois Avenue
Arlington Heights, IL 60004

Signed this 14th day of October, 1995.

Signature of all general partners:

Yina Chang
Yina Chang

c:\wp51\ivax\chang.cer

FILED
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DIVISION OF CORPORATIONS
95 NOV 22 PM 2:47

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, constituting the sole general partner of Tigress Limited Partnership, a Florida limited partnership, certifies as follows:

The amount of capital contributions to date of the limited partners is $ 0.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals $2,000,000.00.

The 24th day of October, 1995.

FURTHER AFFIANT SAYETH NOT.

Under the 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.

Yina Chang

Yina Chang

c:\wp51\ivax\chang.aff

A95000001804

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96 FEB 15 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICE USE ONLY (Document #)

Tigress Limited Partnership
(Requestor's Name)
1001 S. Bayshore Drive, Suite 2502
(Address)
Miami, Fl. 33131
(City/State, Zip) (Phone #)

OFFICE USE ONLY

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

1. Tigress Limited Partnership
(Corporation Name) (Document #)
2. (Corporation Name) (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

600001715816
-02/15/96--01063--020
****140.01 ****140.01

☐ 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 FILNGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

A95-1804

Name Availability	2-15
Document Examiner	
Updater	
Updater Verifyer	
Acknowledgement	
W. P. Verifyer	

Examiner's Initials	

CR2E031(9/92)

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 TIGRESS LIMITED PARTNERSHIP, 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: $ 2,020,200.00 .

This 6th day of February, 19 96.

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)

Yina Chang

FILED
96 FEB 15 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

INHSE20(3/95)

FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996

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

FILED
96 FEB 15 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

Tigress Limited Partnership

1a. DOCUMENT #
A95000001804

Mailing Address	Principal Office Address
1001 S. Bayshore Drive Suite 2502 Miami, Florida [redacted]	1001 S. Bayshore Drive Suite 2502 Miami, Florida 33131

If above addresses are incorrect in any way, [illegible] through the incorrect information and enter correct address in Block 2 and/or 2a

2. New Mailing Address, if Applicable
Suite, Apt. #, etc.
City, State & Zip

2a. New Principal Office Address, if Applicable
Suite, Apt. #, etc.
City, State & Zip

3. Date Formed or Registered to Do Business in FLORIDA	**3a.** Date of Last Report	**4.** State or Country of Formation
November 22, 1995	N/A	Florida

5a. Capital Contributions as Shown on Record	**5b.** Amount of Capital Contributions in FLORIDA to date	**6.** FEI Number		**7.** CERTIFICATE OF STATUS REQUIRED
$2,020,200.00	2,020,200.00	36-4046546	Applied For Not Applicable	[redacted]

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 607.193, 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.

QR 2-15

9. Name and Address of Current Registered Agent

Mr. Daniel Bell
1001 S. Bayshore Drive
Suite 2502
Miami, Florida 33131

10. If changed, new Registered Agent/Office

Name
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt. #, etc.
City — FL — Zip Code

200001715972
-02/15/96--01082--002
****576.25 ****576.25

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 hereby 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)	**11a.** Address of Each General Partner (Do NOT Use Post Office Box Numbers)	**11b.** City, State & Zip Code	**11c.** Registration/ Document Number
Yina Chang	2215 N. Illinois Avenue	Arlington Heights, Illinois 60004	

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 Yina Chang DATE 12/14/95

Typed or Printed Name of General Partner Signing Form Yina Chang Telephone Number (510) 794-4760

CR2E003 (6/95)