

1204 HAYS STREET
TALLAHASSEE, FL 32304
904-222-9171
904-222-0183 FAX

800-343-8086



H95000001804

ACCOUNT NO. : 072100000032

REFERENCE : 743532 142159A

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE : November 22, 1995

ORDER TIME : 10:41 AM

ORDER NO. : 743532

CUSTOMER NO: 142159A

CUSTOMER: Ms. Claudette L. Burdine
ROTH & SCHOLL

Suite 176
1500 San Remo Avenue
Coral Gables, FL 33146

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 NOV 22 PM 2:41

RECEIVED
95 NOV 22 PM 2:05
DIVISION OF CORPORATIONS

DOMESTIC FILING

NAME: TIGRESS LIMITED PARTNERSHIP

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

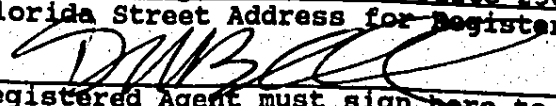
EXAMINER'S INITIALS:

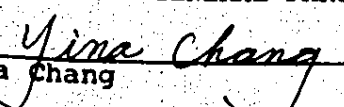
G. TAX	
FILING	17.50
R. AGENT FEE	25
C. COPY	
TOTAL	17.50
% BANK	
BALANCE DUE	

11/22/95

CERTIFICATE OF LIMITED PARTNERSHIP
OF
TIGRESS LIMITED PARTNERSHIP

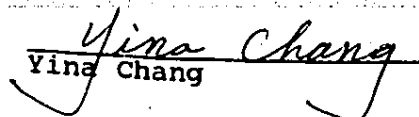
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 NOV 22 PM 2:17

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

	SPECIFIC ADDRESS
<u></u> Yina Chang	2215 N. Illinois Avenue Arlington Heights, IL 60004

Signed this 24th day of October, 1995.

Signature of all general partners:


Yina Chang

c:\wp51\ivax\chang.cer

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 NOV 22 PM 2:17

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

FILED

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 502

(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 #)

600001715816

-02/15/96--01063--020

3.

(Corporation Name)

(Document #)

****140.01 ****140.01

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

A95-1804

Name	CR2-15
Availability	
Document	
Examiner	
Updater	
Updates	
Verifier	
Acknowledgment	
W. P. Verifier	

Examiner's Initials



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

FEES:

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

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

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 Morham
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

1a. DOCUMENT #
A95000001804

Tigress Limited Partnership

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

Mailing Address

Principal Office Address

1001 S. Bayshore Drive
Suite 2502
Miami, Florida

1001 S. Bayshore Drive
Suite 2502
Miami, Florida 33131

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

3. Date Formed or Registered to Do Business in
FLORIDA
November 22, 1995

3a. Date of Last Report
N/A

4. State or Country of Formation
Florida

5a. Capital Contributions as Shown
on Record
\$2,020,200.00

5b. Amount of Capital Contributions in
FLORIDA to date
2,020,200.00

6. FEI Number
36-4046546

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 607.193, 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.

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 Accepted)

Suite, Apt. #, etc.

City

200001715372
-02/15/96--01082--002
****576.25 ****576.25

FL

Zip Code

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)