A95000001948

GARRETT GROUP

United States
384 S. Military Trail
Deerfield Beach, Florida 33442
(305) 480-8543 / fax: (305) 698-0057

United Kingdom
10-16 Cole Street
London SE 1 4YH
(071) 357-0367 / fax: (071) 357-0347

November 3, 1995

600001630946
-11/07/95--01068--002
*****87.50 *****87.50

Secretary of State
Business Filing Division
409 E. Gaines St.
Tallahassee, Fl 32399

Dear Sir/Madam:

Enclosed is a check for $87.50 to cover the filing fees for the following limited partnership:

River Falls Limited Partnership

Please return completed forms to the address above.

Sincerely,

Beverly Sanders

Beverly Sanders
Manager

FILED
1995 DEC 12 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name Availability	12/14/95 dcc
Document Examiner	
Update	
Updater Verifyer	
Acknowledgement	DCC
W. P. Verifyer	DCC

A95000001948

W95000022254

TC $100.00

BARRETT GROUP

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Deerfield Beach, Florida 33442
(305) 480-8543 / fax: (305) 698-0057

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10-16 Cole Street
London SE 1 4YH
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December 8, 1995

Secretary of State
Business Filing Division
409 E. Gaines St.
Tallahassee, Fl 32399

Dear Sir/Madam:

You are in receipt of a check for $87.50 to cover the filing fees for a limited partnership whose name has been changed. (See attached letter).

The new name is New River Falls Limited Partnership.

Please return completed forms to the address above.

Sincerely,

Beverly Sanders

Beverly Sanders
Manager

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

November 9, 1995

BEVERLY SANDERS
GARRETT GROUP
384 S. MILITARY TRAIL
DEERFIELD BEACH, FL 33442

SUBJECT: RIVER FALLS LIMITED PARTNERSHIP
Ref. Number: W95000022254

We have received your document for RIVER FALLS LIMITED PARTNERSHIP and your check(s) totaling $87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 695A00049966

CERTIFICATE OF LIMITED PARTNERSHIP

OF

NEW RIVER FALLS LIMITED PARTNERSHIP

1. New River Falls Limited Partnership
(Name of Limited Partnership: must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")

2. 13221 Forestview, Crestwood, Illinois
(The Business Address of Limited Partnership)

3. Mark Lauer
(Name of Registered Agent for Service of Process)

FILED
1995 DEC 12 PM 12:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4. 360 S. Military Trail, Deerfield Beach, Fl 33442
(Florida street address)

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

6. 13221 Forestview, Crestwood, Illinois
(The Mailing Address of the Limited Partnership.)

7. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2060.

8.

NAME OF GENERAL PARTNER(S)	SPECIFIC ADDRESS
Robert Smurzynski	13221 Forestview Crestwood, Illinois 60445
Beverly Smurzynski	13221 Forestview Crestwood, Illinois 60445

Signed this 5 day of December, 95

Signature of all general partners:

Robert Smierzynski
General Partner

Brief Smierzynski
General Partner

General Partner

General Partner

FILED
1995 DEC 12 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of New River Falls Limited Partnership, a Florida Limited Partnership, certify as follows:

FILED
95 DEC 12 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The amount of capital contributions to date of the limited partners is $ 1,000.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals $1,000.00.

This 5th day of December, 1995.

FURTHER AFFIANT SAYETH NOT.

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

GENERAL PARTNER

Robert Smurzynski
Robert Smurzynski

GENERAL PARTNER

Beverly Smurzynski
Beverly Smurzynski

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996

A95000001948

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
96 JAN 23 PM 4:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership
New River Falls
Limited Partnership

1a. DOCUMENT #
A95000001948

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
384 S Military Trail
Deerfield Beach FL 33442

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

3. Date Formed or Registered to Do Business in FLORIDA
12-12-95

3a. Date of Last Report

4. State or Country of Formation

5a. Capital Contributions as Shown on Record
1000.

5b. Amount of Capital Contributions in FLORIDA to date

6. FEI Number

X Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED ☐ [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.

9. Name and Address of Current Registered Agent
Mark Lauer
360 S. Military Trail
Deerfield Beach, Fl. 33442

10. If changed, new Registered Agent/Office
Name

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

Suite, Apt. #, etc

City

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
Smurzynski, Robert	13221 Forestview	Crestwood, IL. 60445	
Smurzynski, Beverly	13221 Forestview	Crestwood, IL. 60445	

900001701669
-01/30/96--01100--021
****200.00 ****200.00

KWM/cw

CR2E003 (6/95)

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 Beverly Smurzynski

Typed or Printed Name of General Partner Signing Form Beverly Smurzynski DATE 12-31-95

Telephone Number 308-388-0747