1201 Hays Street
Tallahassee, FL 32301
904-222-9171
904-222-0393 FAX

800-342-8036

CSC networks
PRENTICE HALL LEGAL & FINANCIAL SERVICES

A95000001999

FILED
95 DEC 21 PM 1:56
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ACCOUNT NO. : 072100000032

REFERENCE : 778691 11175A

AUTHORIZATION :

COST LIMIT : $ PREPAID

500001670245
12/26/95--01028--006
*****87.50 *****87.50

ORDER DATE : December 21, 1995

ORDER TIME : 9:41 AM

ORDER NO. : 778691

CUSTOMER NO: 11175A

CUSTOMER: Ms. Cyleste A. Wollett
WOLLETT & ASSOCIATES, PA

Suite 103
4440 P.g.a. Boulevard
Palm Beach Gard, FL 33410

BK 12/21/95

S. TAX	
FILING	52.50
R. AGENT FEE	35.00
C. COPY	
TOTAL	87.50
N. BANK	
BALANCE DUE	
REFUND	

DOMESTIC FILING

NAME: PEE WEE HAVEN, LTD

_____ ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Carol M. Hensal

EXAMINER'S INITIALS: BK 12/21/95

95 DEC 21 AM 11:14
DIVISION OF CORPORATION

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 DEC 21 PM 1:57

CERTIFICATE OF LIMITED PARTNERSHIP
OF
PEE WEE HAVEN, LTD.

1. PEE WEE HAVEN, LTD.
(Name of Limited Partnership; must contain suffix such as "Limited", "Ltd.", or "Limited Partnership")

2. 4440 PGA BOULEVARD, SUITE 103 PALM BEACH GARDENS, FL 33410
(The Business Address of the Limited Partnership)

3. CYLESTE A. WOLLETT
(Name of Registered Agent for Service of Process)

4. 4440 PGA BLVD., SUITE 103 PALM BEACH GARDENS, FL 33410
(Florida Street Address for Registered Agent)

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

6. 4440 PGA BOULEVARD, SUITE 103 PALM BEACH GARDENS, FL 33410
(The Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is JANUARY 1, 2050.

8. NAME OF GENERAL PARTNER(S)	SPECIFIC ADDRESS
CYLESTE A. WOLLETT	12860 OAK KNOLL DRIVE PALM BEACH GARDENS, FLORIDA 33418

Signed this 20TH day of DECEMBER, 1995.

Signature of all General Partner(s):

Cyleste A. Wollett
CYLESTE A. WOLLETT

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 DEC 21 PM 1:57

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of PEE WEE HAVEN, LTD., a Florida Limited Partnership, certify as follows:

The amount of capital contributions to date of the limited partners is:

$ 99.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals:

$7,500.00.

This 20TH day of DECEMBER, 1995.

FURTHER AFFIANT SAYETH NAUGHT.

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.

Celeste A. Wollett

CELESTE A. WOLLETT

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

LIMITED PARTNERSHIP ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

A95000001999

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 DEC 21 PM 1:58

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership: Pee Wee Haven, Ltd.

1a. DOCUMENT # A95000001999

2. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip 900001670269 -12/26/95--01029--010 ****191.25

2a. New Principal Office Address ****191.25

Suite, Apt. #, etc.

City, State & Zip

Mailing Address
4440 PGA Blvd., Suite 103
Palm Beach Gardens, FL
33410

Principal Office Address
4440 PGA Blvd., Suite 103
Palm Beach Gardens, FL
33410

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	3a. Date of Last Report	4. State or Country of Formation
	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
7,500.00	99.00	Applied For	Applied For ☐ Not Applicable ☐

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

Cyleste A. Wollett
4440 PGA Blvd., Suite 103
Palm Beach Gardens, FL 33410

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

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
Cyleste A. Wollett	12860 Oak Knoll Dr.	Palm Beach Gardens FL 33418	

MAR
SLOOP

52.50
138.75
191.25

B/C
12/21/95

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 Cyleste A. Wollett DATE 12-20-95

Typed or Printed Name of General Partner Signing Form CYLESTE A. WOLLETT Telephone Number 407-622-0800

CR2E003 (6/95)