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ACCOUNT NO. : 072100000032

REFERENCE : 927139 6221A

**AUTHORIZATION** :

COST LIMIT : # PREPAID

ORDER	DATE	2	Aprel 1	ព្រះ	1996

ORDER TIME : 3:08 PM

ORDER NO. : 927139

CUSTOMER NO: 6221A

CUSTOMER: Gatha K. Milhorn, Legal Asst

ABEL BAND RUSSELL COLLIER PITCHFORD & GORDON, CHARTERED Barnett Bank Center, 8-10th Fl 240 South Pineapple Avenue

Sarasota, FL 34236-6737

WALLY CHOICE

# DOMESTIC FILING

HAME:

THE HAYS FAMILY PARTNERSHIP,

LTD.

# EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Victoria L. Perez

EXAMINER'S INITIALS:

i. IAI 1/26/96

R. AGENT FLE 35.W C. COPY 52.50

10141 934.71

N. BANK BALANCE BUE

REPTAND \_\_\_\_\_

#### CERTIFICATE OF LIMITED PARTNERSHIP OF

THE HAYS FAMILY ASSOCIATES, LTD.

# a Florida limited partnership

The undersigned general partner desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Chapter 620 of the Florida Statutos, does hereby state the following:

- 1. The name of the Partnership is THE HAYS FAMILY ASSOCIATES, LTD.
- 2. The address of the office of the Partnership is:

1845 Tulip Drive Sarasota, Florida 34239

3. The name and address of the agent for service of process on the Partnership is as follow:

> Michael Hays 1845 Tulip Drive Sarasota, Florida 34239

4. The names and business addresses of the general partners are as follows:

Gale Eder 1845 Tulip Drive Sarasota, Florida 34239

Michael Hays 1845 Tulip Drive Sarasota, Florida 34239

5. The mailing address of the Partnership is:

1845 Tulip Drive Sarasota, Florida 34239

- 6. The latest date upon which the Partnership shall dissolve is December 31, 2045, unless the term of the Partnership is further extended by a Majority in Interest of the Partners as defined in this Agreement.
- 7. The effective date of this Certificate of Limited Partnership shall be the effective date of the filing of the certificate of limited partnership with the Department of State.

The execution of this certificate by the undersigned general partners constitutes in affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Cortificate of Limited Partnership has been executed by Gale Eder and Michael Hays, the general partners of the mays family associates, http. , a Florida Limited Partnership, this statement of the layer day of statement of the limited partnership, this statement of the layer day of statement of the layer day o

WITNESSES:

ale Eder, General Partne

2

lichael Hays. General Partner

#158869.1

# ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named to accept service of process for the HAYS FAMILY ASSOCIATES, LTD... at the place designated in the foregoing Certificate of Limited Partnership, I, Michael Hays, hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 620.192, Florida Statutes.

Date: 4/15/96

Michael Hays, Registered Agent

#166192.1

STATE OF FLORIDA COUNTY OF SARASOTA

### AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned Notary Public, personally appeared GALE EDER and MICHAEL HAYS, the general partners of THE HAYS FAMILY ASSOCIATES , LTD., a Florida limited partnership, hereinafter referred to as "Partnership," who, upon being duly sworn, certified as follows:

- 1. The amount of the capital contributions of the limited partners of the Partnership is \$121,030.00
- 2. The amount of additional capital contributions of the limited partners of the Partnership anticipated is \$\_-0-.

Under 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.

WITNESSES:

LE EDER

"General Partner"

"General Partner"

(notary signatures appear on next page)

THE HAYS FAMILY ASSOCIATES, LTD.	GALE EDER, a General Partner of who is personally known to me-or-
who has producou identification and who did (did no	ot) take an oath.
	Notary Public Print Name
<u>N</u> .	OFFICIAL NOTARY SEAL BRADLEY D MAGEE PARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC282007 Y COMMISSION EXP. MAY 2,1997
of the hays family associates. LTD.	
or who has produced	t) take an oath.
	Notary Public Print Name 22
My Commission Expires:	OFFICIAL NOTARY SEAL, BRADLEY D MAGEE NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC282007 MY COMMISSION EXP. MAY 2,1907