

Greenberg

Requestor's Name

Address

Michelle

425-8526

City/State/Zip

Phone #

A96000002167

W/1

Office Use Only

56 MAY 25 PM 3:48

FILED

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

1. Tropical Isle, Ltd

(Corporation Name)

(Document #)

2. Tropical Isle II, Ltd.

(Corporation Name)

(Document #)

700002021157--2

-12/05/96--01069--013

\*\*\*1837.50 \*\*\*1837.50

3. \_\_\_\_\_

(Corporation Name)

(Document #)

4. \_\_\_\_\_

(Corporation Name)

(Document #)

☒ Walk in

☐ Mail out

☒ Pick up time

☒ Will wait

☐ Photocopy

☐ Certified Copy

☐ Certificate of Status

per Brenda Tadlock

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED 1750.00  
C. COPY 52.50  
R. AGENT 25.00  
TOTAL 1837.50  
BALANCE DUE \$  
REFUND \$

B96-0287

some people

Name	Yest 11/25/96
Availability	Yest
Document Examiner	Yest
Updater	Yest
Verifier	Yest
Ad. Number Ed.	Yest
W. C. Sawyer	Yest

11/25

7/4

Examiner's Initials

GREENBERG  
ATTORNEYS AT LAW  
TRAURIG

November 25, 1996

Florida Department of State  
409 East Gaines Street  
Tallahassee, Florida 32399

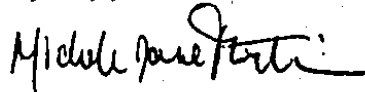
**RE: FILING OF CERTIFICATE OF LIMITED PARTNERSHIP  
FOR TROPICAL ISLE, LTD. AND TROPICAL ISLE II, LTD.**

Dear Sir or Madam:

Enclosed please find one manually executed and one photocopy of the above referenced certificates of limited partnership. **Please file with the State of Florida as soon as possible and return the certified copies to the messenger present. Submitted with this filing are two checks in the amount of \$1,837.50 each to cover the costs of the filing fees, registered agent and certified copy charges.**

Thank you for your assistance with this matter.

Very truly yours,



Michele Jane Turton  
Paralegal

Enc.

GREENBERG TRAURIG HOFFMAN LIPOFF ROSEN & QUENTEK, P.A.  
P.O. Box 4923 ORLANDO, FLORIDA 32802-4923  
407-420-1000 FAX 407-420-5909  
111 NORTH ORANGE AVENUE SUITE 2050 ORLANDO, FLORIDA 32801  
MIAMI NEW YORK WASHINGTON, D.C.  
FORT LAUDERDALE WEST PALM BEACH TALLAHASSEE ORLANDO

**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
TROPICAL ISLE, LTD.**

**THE UNDERSIGNED**, constituting all of the general partners of TROPICAL ISLE, LTD., (the "Partnership"), do hereby submit the following information in accordance with the Florida Revised Limited Partnership Act (1986) to make public the information of the Partnership:

1. **Name** The name of the Partnership shall be TROPICAL ISLE, LTD.
2. **Registered Agent** The initial registered office of the Partnership in the State of Florida is 111 North Orange Avenue, Florida 32801. The name of the initial registered agent is Michael J. Sullivan, Esq. at the above address.
3. **General Partners** The name and address of the general partners of the Partnership are:

NOBLE-KIDD CORPORATION  
10610 Metric, Suite 190  
Dallas, TX 75243

P96000053102

API INVESTMENTS, INC.  
4949 Westown Parkway, Suite 245  
West Des Moines, IA 50266-1066

F 96000006181

4. **Partnership Address** The office and mailing address for the Partnership shall be 10610 Metric, Suite 190, Dallas, TX 75243 .

5. **Dissolution** The latest date upon which the Partnership will dissolve is December 31, 2015.

**IN WITNESS WHEREOF**, the undersigned do hereby execute this Certificate and attach an Affidavit declaring the amount of the capital contribution of the limited partners and the anticipated amount to be contributed by the limited partners.

**GENERAL PARTNERS:**

**NOBLE-KIDD CORPORATION, a  
Florida Corporation**



**R. Edward Noble  
Its: President**

**API INVESTMENTS, INC., an  
Iowa Corporation**



**Roger Langford  
Its: Vice President**

### AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, general partner of TROPICAL ISLE, LTD., a Florida limited partnership, hereinafter referred to as the "Partnership", who upon being sworn, certify as follows:

1. The amount of capital contributions of the limited partners is zero
2. The anticipated amount of the capital contributions of the limited partners will be 3.6 million.

Dated this 21<sup>st</sup> day of November, 1996

**FURTHER AFFIANT SAYETH NOT.**

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

NOBLE-KIDD CORPORATION, a  
Florida Corporation

R. Edward Noble

R. Edward Noble  
Its: President

STATE OF TEXAS  
COUNTY OF

The foregoing instrument was acknowledged before me this 21 day of November, 1996, by R. Edward Noble of Noble-Kidd Corporation, a Florida corporation, the general partner of the above-referenced Partnership, who is personally known to me or has produced \_\_\_\_\_ as identification.

Kimberly D. Noble  
Print name

Notary Public, State of

Commission Number:

My commission expires



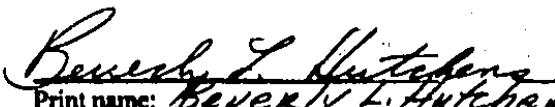
API INVESTMENTS, INC.,  
an Iowa corporation

  
Roger Langpaul  
(ts: 11)

STATE OF IOWA  
COUNTY OF POLK

The foregoing was acknowledged before me the 22<sup>nd</sup> day of November, 1996, by Roger Langpaul, as Vice President of API INVESTMENTS, INC., an Iowa corporation, the general partner of the above-referenced Partnership, who is personally known to me or has produced \_\_\_\_\_ as identification.



  
Print name: BEVERLY L. HUTCHENS  
Notary Public, State of IOWA  
Commission Number: \_\_\_\_\_  
My commission Expires: 10-14-97

**ACCEPTANCE BY REGISTERED AGENT**

THE UNDERSIGNED, as registered agent, appointed in accordance with the foregoing Certificate, does hereby accept such appointment, and does hereby state that it is familiar with, and accepts, the obligations imposed by Section 620.192 of the Florida Revised Uniform Limited Partnership Act (1986).

*Michael J. Sullivan*  
Print Name: Michael J. Sullivan, Esq.  
Its: Registered Agent

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA