

**A97000002111**

Requestor's Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_ Phone # \_\_\_\_\_

Office Use Only

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

1. **A97000002111**  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 97 SEP 22 PM 1:57

- Walk in       Pick up time \_\_\_\_\_       Certified Copy  
 Mail out       Will wait       Photocopy       Certificate of Status

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

400002310154--2  
 -10/02/97--01084--008  
 \*\*\*\*381.50 \*\*\*\*381.50

V. TAX \_\_\_\_\_  
 FILING 346.50  
 P. AGENT FEE 352.00  
 C. COPY \_\_\_\_\_  
 TOTAL 381.50  
 V. BANK \_\_\_\_\_  
 BALANCE DUE \_\_\_\_\_  
 REFUND \_\_\_\_\_

*mk*  
 9/22/97

Examiner's Initials \_\_\_\_\_

Walk-ID 9/29



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

September 22, 1997

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: ATC/VANCOM MANAGEMENT SERVICES OF PENSACOLA,  
FLORIDA LIMITED PARTNERSHIP  
Ref. Number: W97000021702

We have received your document for ATC/VANCOM MANAGEMENT SERVICES OF PENSACOLA, FLORIDA LIMITED PARTNERSHIP and check(s) totaling ~~\$70.50~~ <sup>\$381.50</sup>. However, your check(s) and document are being returned for the following:

The CERTIFICATE document is not complete. In addition to the information listed, it must also give the name and address of the partnership's general partner, and the certificate MUST BE SIGNED by the General Partner.,

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 (850) 487-6914.

Buck Kohr  
Corporate Specialist

Letter Number: 597A00046811

*Buck,*  
*Can you please*  
*back date*  
*Thanks*

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SECRETARY OF STATE  
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97 SEP 22 PM 1:57

RECEIVED  
97 SEP 29 PM 1:18  
DIVISION OF CORPORATION

CERTIFICATE OF LIMITED PARTNERSHIP  
OF

FILED OF STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
97 SEP 22 PM 1:57

1. ATC/VANCOM MANAGEMENT SERVICES OF PENSACOLA, FLORIDA LIMITED PARTNERSHIP  
(Name of Limited Partnership; must contain a suffix such as "Limited",  
"Ltd.", or "Limited Partnership")

2. One Mid America Plaza, Suite 401, Oakbrook Terrace, Illinois 60181  
(The Business Address of Limited Partnership)

3. CT CORPORATION SYSTEM  
(Name of Registered Agent for Service of Process)

4. c/o C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324  
(Florida Street Address for Registered Agent)

5. Acceptance by the Registered Agent for Service of Process.

CT CORPORATION SYSTEM

Jonnie Bryan  
(Officer Must Sign on This Line)

JONNIE BRYAN  
SPECIAL ASSISTANT SECRETARY  
(Type Name and Title of Officer)

6. One Mid America Plaza, Suite 401, Oakbrook Terrace, Illinois 60181  
(The Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is 12/31/2035

(Cont'd)

8. NAME OF GENERAL PARTNER(S)

SPECIFIC ADDRESS

ATC/Vancom, Inc.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

One Mid America Plaza, Suite 401  
 Oakbrook Terrace, Illinois 60181  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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 DIVISION OF CORPORATIONS  
 9 19 SEP 22 PM 1:57

84700000953

Signed this 19th day of September, 1997.  
 Signature of all general partners:

ATC/VANCOM, INC.

By: Rodney J. Van Der Aa  
 General Partner  
 Rodney J. Van Der Aa, Vice President

\_\_\_\_\_  
 General Partner

\_\_\_\_\_  
 General Partner

\_\_\_\_\_  
 General Partner

\_\_\_\_\_  
 General Partner

### AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of ATC/VANCOM  
MANAGEMENT SERVICES OF PENSACOLA,  
FLORIDA LIMITED PARTNERSHIP \_\_\_\_\_, a Florida Limited Partnership, certify as follows:

DIVISION OF STATE CORPORATIONS  
9:52:22 PM 1997

The amount of capital contributions to date of the limited partners is \$ 49,500.00

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 49,500.00

This 19th day of September, 19 97

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.  
ATC/VANCOM, INC., sole general partner

By: Rodney J. Van Der Aa  
General Partner  
Rodney J. Van Der Aa, Vice President

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner