# A9700000 2529

## FILING COVER SHEET

REFERENCE:	0171.1027
	11-21-97
DATE:	= = = = = = = = = = = = = = = = = = = =
CONTACT:	CINDY HICKS
FROM:	CORPORATE & CRIMINAL RESEARCH SERVICES 7
	103 N. MERIDIAN STREET
	TALLAHASSEE, FL 32301
TELEPHONE:	222-1173
SUBJECT:	Newport Partners KKKV, Ltd
PLEASE FILE:  ( ) ARTICLES OF INC.	-11/25/9701028012 ***1837.50 ***1837.50 
( ) QUALIFICATION	LIMITED PARTNERSHIP ( ) ANNUAL REPORT
( ) FICTITIOUS NAME	() LIMITED LIABILITY () REINSTATEMENT
( ) UCC-1	() LIMITED LIABILITY () REINSTATEMENT DE SON DE COMPANY
PROVIDE US WITH:	
) CERTIFIED COPY	() CERTIFICATE OF STATUS () STAMPED COPY
	COPY 52.50
Examiner's Initials	BALANCE DUE
	ACCOUNT.

# CERTIFICATE OF LIMITED PARTNERSHIP OF NEWPORT PARTNERS XXXV, LTD.

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, Sections 620.101 through 620.186 of the Florida Statutes, hereby states the following:

- 1. The name of the Partnership is Newport Partners XXXV, Ltd.
- 2. The address of the office of the Partnership as referred to in Section 620.105, Florida Statutes, is 300 International Parkway, Suite 270, Heathrow, Florida 32746.
- 3. The name of the agent for service of process on the Partnership shall be Peter S. Cahall, 300 International Parkway, Suite 270, Heathrow, Florida 32746.
  - 4. The name and business address of the General Partner are:

Name

Address

Newport Partners XXXV, Inc. 300 International Parkway, Suite 270 Heathrow, Florida 32746

- 5. The mailing address for the Partnership is 300 International Parkway, Suite 270, Heathrow, Florida 32746.
- 6. The latest date upon which the Partnership shall dissolve is December 31, 2041.
- 7. A conveyance or encumbrance of real property or any interest therein held in the name of the Partnership, and any other instrument affecting title to real property in which the Partnership has an interest, shall be executed in the Partnership name by the General Partner.

This Certificate of Limited Partnership was executed by the General Partner this 19 day of November, 1997.

GENERAL PARTNER

NEWPORT PARTNERS XXXV, INC., a Florida corporation,

By:

Peter S. Cahall, President

# ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for the above-named Partnership, at the place designated in the foregoing Certificate of Limited Partnership, I hereby accept such appointment and agree to act in such capacity, and I further agree to comply with provisions of all statutes relevant to the proper and complete performance of the duties of a registered agent. I am familiar with, and accept the duties and obligations of, Section 620.192 of the Florida Statutes.

REGISTERED AGENT

Peter S. Cahall

Date: November 19, 1997

### STATE OF FLORIDA

### COUNTY OF SEMINOLE

### **AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, personally appeared PETER S. CAHALL, President of NEWPORT PARTNERS XXXV, INC., the sole general partner of NEWPORT PARTNERS XXXV, LTD., a Florida limited partnership (the "Partnership"), of Seminole County, Florida, who upon being duly sworn, certified as follows:

- 1. The amount of the capital contributions to the Partnership made by the limited partners is \$705,000.00.
- 2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$ -0-.

### FURTHER AFFIANT SAYETH NOT.

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.

Date: November 19, 1997

By:
Peter S. Cahall, President

GENERAL PARTNER

Sworn to and subscribed before me this \_\_\_\_ day of November, 1997, by PETER S. CAHALL, President of NEWPORT PARTNERS XXXV, INC., as General Partner on behalf of NEWPORT PARTNERS XXXV, LTD., a Florida limited partnership. He (check one) I is personally known to me, I produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or I produced other identification, to wit:\_\_\_\_\_\_\_.

Print Name: Dance LiProtte

Notary Public - State of Florida

Commission No.: \_\_\_\_\_ My Commission Expires BONNIE L PRATTE
My Commission CC416103
Expires Nov. 29, 1998
Bonded by HAI
800-422-1555

STATE PAINS

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