

CAPITAL CONNECTION, INC.
417 E. Virginia Street, Suite 1 Tallahassee, Florida 32301
(850) 224-8877 • 1-800-342-0066 • Fax (850) 224-1722

AF1800000056

Ahyikchi, LTD.

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-01/06/98--01067--012
****140.00 ****140.00

~~File Second~~

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LP - 87.50
CERT 52.50

Signature _____

Requested by: RS

Date

Time

Name

Will Pick Up

Walk-In

Art of Inc. File _____

LTD Partnership File _____

Foreign Corp. File _____

L.C. File _____

Fictitious Name File _____

Trade/Service Mark _____

Merger File _____

Art. of Amend. File _____

RA Resignation _____

Dissolution / Withdrawal _____

Annual Report / Reinstatement _____

☒ Cert. Copy _____

Photo Copy _____

Certificate of Good Standing _____

Certificate of Status _____

Certificate of Fictitious Name _____

Corp Record Search _____

Officer Search _____

Fictitious Search _____

Fictitious Owner Search _____

Vehicle Search _____

Driving Record _____

UCC 1 or 3 File _____

UCC 11 Search _____

UCC 11 Retrieval _____

Courier _____

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98 JAN -6 AM 10:12

AFFIDAVIT AND LIMITED PARTNERSHIP CERTIFICATE
OF AHYIKCHI, LTD.

The undersigned, desiring to form a Limited Partnership pursuant to Chapter 620 of the Florida Statutes, being duly sworn, hereby certifies as follows:

1. The name of the limited partnership is Ahyikchi, Ltd.
2. The name and address for the agent for service of process on the Limited Partnership is:

HELISHWA, INC.
Michael Bond, President
Big Cypress Reservation
Frank Billie Center
HC 61, Box 46
Clewiston, FL 33440

3. The name and business address of the General Partner is:

HELISHWA, INC.
Big Cypress Reservation
Frank Billie Center
HC 61, Box 46
Clewiston, FL 33440

4. The mailing address and principal place of business of the Limited Partnership is:

AKYIKCHI, LTD.
Big Cypress Reservation
Frank Billie Center
HC 61, Box 46
Clewiston, FL 33440

5. The latest date upon which the Limited Partnership is to dissolve is December 31, 2006.

6. The name and address of each General and Limited Partner, together with their capital contributions and the amount anticipated to be contributed is as follows:

| <u>General Partner</u> | <u>Address</u> | <u>Contribution</u> |
|------------------------|--|---------------------|
| HELISHWA, INC. | Big Cypress Reservation Frank Billie Center HC 61, Box 46 Clewiston, FL 33440 | \$ 10.00 |

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| <u>Limited Partners</u> | <u>Address</u> | <u>Contribution</u> |
|------------------------------|--|---------------------|
| SEMINOLE TRIBE OF FLORIDA | 6300 Stirling Road Hollywood, FL 33024 | \$495.00 |
| PAHE-OKEE, INC. | 3415 SW 24th Street, No. 15 Gainesville, FL 32607 | \$495.00 |

7. The partnership shall begin business upon the filing of this Certificate of Limited Partnership with the Department of State.

IN WITNESS WHEREOF, the General Partner has executed this Certificate on this 5th day of January, 19 98.

HELISHWA, INC.

By:

Michael Bond
Michael Bond
as its President

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STATE OF FLORIDA)

COUNTY OF BROWARD)

Alachua

ss:

BEFORE ME, the undersigned authority, personally appeared Michael Bond, President of Helishwa, Inc., who is personally known to me, and who after being duly sworn, deposes and says that the statements made in the foregoing Certificate are true and correct.

Produced Florida Drivers License as identification
SWORN before me this 5th day of January, 19 98.



Fawn E Bryant
Notary Public

My commission expires: _____

**CERTIFICATION OF DESIGNATION OF REGISTERED AGENT,
REGISTERED OFFICE AND ACCEPTANCE OF DESIGNATION**

Pursuant to the provisions of §620.105, Florida Statutes, the mentioned Limited Partnership, Ahyikchi, Ltd., organized under the laws of the State of Florida, submits the following statement in designating the Registered Agent/Registered Office in the State of Florida.

1. The name of the Limited Partnership is Ahyikchi, Ltd.
2. The name and address of the Registered Agent and Registered Agent's Office is:

HELISHWA, INC.
Michael Bond, President
Big Cypress Reservation
Frank Billie Center
HC 61, Box 46
Clawiston, FL 33440

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HAVING been named as Registered Agent and to accept service of process for the above stated Limited Partnership at the place designated in this Certificate, I hereby accept an appointment as Registered Agent and agree to act in this capacity.

HELISHWA, INC.

Dated: 1-5-98

By:

Michael Bond
Michael Bond
as its President

State of Florida
County of Alachua

Notary of the Signature of Michael Bond
who produced Florida Drivers License as
identification.



Fawn E Bryant, Notary