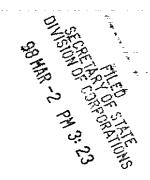
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FILING COVER SHEET

REFERENCE:	0/63.1742
DATE:	3-2-98
CONTACT:	CINDY HICKS
FROM:	CORPORATE & CRIMINAL RESEARCH SERVICES
	103 N. MERIDIAN STREET
	TALLAHASSEE, FL 32301
TELEPHONE:	222-1173
SUBJECT:	Kamseur Panily Limited
	Partnership, Ltd.
STATE FEES PREPAID	WITH CHECK # 400002443704 400002443704 -03/02/9801027022 ***1793.75 ***1793.75
PLEASE FILE:	
() ARTICLES OF INC.	() AMENDMENT () DISSOLUTION () ANNUAL REPORT
() QUALIFICATION	(LIMITED PARTNERSHIP () ANNUAL REPORT
() FICTITIOUS NAME	() LIMITED LIABILITY () REINSTATEMENT SEE THE
() UCC-1	() LIMITED LIABILITY () REINSTATEMENT SO TO TO THE COLUMN TERMENT SO THE COLUMN TERMENT
PROVIDE US WITH:	
() CERTIFIED COPY	() UCC-3 CERTIFICATE OF STATUS STAMPED COPY
	——————————————————————————————————————
Examiner's Initials	



CERTIFICATE OF LIMITED PARTNERSHIP OF RAMSEUR FAMILY LIMITED PARTNERSHIP

The undersigned hereby executes and swears to this Certificate of Limited Partnership for the purpose of forming a limited partnership under the laws of the State of Florida.

- 1. <u>Name of Partnership</u>. The name of the Partnership shall be RAMSEUR FAMILY LIMITED PARTNERSHIP.
- 2. Address of Recordkeeping Office: Agent for Service of Process. The records to be kept pursuant to *Florida Statute* Section 620.106 shall be located at 803 Ben Lomond Drive, Temple Terrace, Florida 33617, and the name of the Partnership's agent for service of process at said address is HENRY M. RAMSEUR.
- 3. Name and Business Address of the General Partner. The name and address of the General Partner is as follows:

Name

Ramseur Enterprises, Inc., a Florida corporation

Address

803 Ben Lomond Drive Temple Terrace, Florida 33617

- 4. <u>Mailing Address for the Limited Partnership</u>. The mailing address for the Limited Partnership shall be located at 803 Ben Lomond Drive, Temple Terrace, Florida 33617.
- 5. <u>Term.</u> The term for which the Partnership is to exist shall be fifty (50) years from the filing of this Certificate in the Office of the Secretary of State of the State of Florida, unless sooner terminated in accordance with a Limited Partnership Agreement for RAMSEUR FAMILY LIMITED PARTNERSHIP, LTD.

DATED this 27" day of February, 1998.

GENERAL PARTNER:

RAMSEUR ENTERPRISES, INC.

a Florida corporation

Henry M. Ramseur, President

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within Limited Partnership, at the place designated herein, I 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.

HENRY M. RAMSEUR

6929-002-0489280.01

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

- I, HENRY M. RAMSEUR, in my capacity as the President of RAMSEUR ENTERPRISES, INC., a Florida corporation, the sole general partner of RAMSEUR FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, hereinafter referred to as the "Partnership," who, upon being sworn, certifies as follows:
 - 1. The limited partners have contributed \$102,380.00 of capital to the Partnership.
- 2. It is anticipated that \$597,620.00 of additional contributions shall be contributed by the limited partners in the future.

This 27 day of February, 1998.

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.

GENERAL PARTNER:

RAMSEUR ENTERPRISES, INC.

a Florida corporation

By: Henry M. Ramseur, President

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this ____ day of February, 1998, by HENRY M. RAMSEUR, as President of RAMSEUR ENTERPRISES, INC., a Florida corporation, the general partner of RAMSEUR FAMILY LIMITED PARTNERSHIP, on behalf of the limited partnership, who is personally known to me or who has produced as identification and who did take an oath.

NOTARY PUBLIC

Name: Olic G. Shiver

Commission No.

My Commission Expires:

6929-002-0489280.01

