

A98000001786



ACCOUNT NO.: 072100000032

REFERENCE : 903568 3487A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : July 24, 1998

ORDER TIME : 10:38 AM

ORDER NO. : 903568-005

CUSTOMER NO: 3487A

CUSTOMER: Paula M. Moser, Legal Asst
ICARD MERRILL CULLIS TIMM
FUREN & GINSBURG, PA
2033 Main Street, Suite 101
P. O. Drawer 4195
Sarasota, FL 34237

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-07/27/98--01003--001
***1846.25 ***1846.25

DOMESTIC FILING

NAME: SW PROPERTIES, LTD.

EFFECTIVE DATE:

XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS:

FILED
98 JUL 24 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 JUL 24 PM 4:16
DIVISION OF CORPORATION



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 27, 1998

TAMARA ODOM
CSC
TALLAHASSEE, FL

SUBJECT: SW PROPERTIES, LTD.
Ref. Number: W98000016967

FILED
98 JUL 29 AM 11:14
DIVISION OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SW PROPERTIES, LTD. and your check(s) totaling \$1846.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

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) 487-6025.

Cathy A Mitchell
Corporate Specialist

Letter Number: 598A00039413

**CERTIFICATE OF LIMITED PARTNERSHIP OF
SW PROPERTIES I, LTD.
A FLORIDA LIMITED PARTNERSHIP**

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, hereby states:

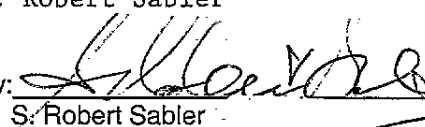
1. The name of the Partnership is SW PROPERTIES I, LTD.
2. The address of the office of the Partnership is 5880 Midnight Pass Road, Unit 807, Sarasota, Florida 34242.
3. The name and address of the agent for service of process on the Partnership is Icard, Merrill, Cullis, Timm, Furen & Ginsburg, P.A., 2033 Main Street, Suite 600, Sarasota, Florida 34237.
4. The name and address of the sole general partner is S. Robert Sabler,
5880 Midnight Pass Road, Unit 807, Sarasota, Florida 34242.
5. The mailing address of the Partnership is 5880 Midnight Pass Road, Unit 807, Sarasota, Florida 34242.
6. The latest date upon which the Partnership shall dissolve is July 31, 2018.

The execution of this certificate by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed on behalf of the sole General Partner of SW PROPERTIES I, LTD. this 23 day of July, 1998.

GENERAL PARTNER:

S. Robert Sabler

By: 
S. Robert Sabler

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58 JUL 24 AM 11:14
CLERK OF DISTRICT COURT
MILWAUKEE, WISCONSIN

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA
COUNTY OF SARASOTA

BEFORE ME, the undersigned authority, personally appeared S. ROBERT SABLER,
sole general partner of SW PROPERTIES I, LTD.
"Partnership"), who, upon being duly sworn, certified as follows:

1. The amount of capital contributions to the Partnership made by the limited partners is, in the aggregate, \$460,000.00.

2. At this time, it is not anticipated that additional capital contributions will be made by the limited partners.

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.

S. Robert Sabler

By: 

S. Robert Sabler

Sworn to and subscribed before me this 23rd day of July, 1998 by S. ROBERT SABLER,
☒ who is personally known to me; or ☐ who
has produced _____ as identification.


Print Name: _____

Notary Public

My Commission Expires 

Paula Moser

MY COMMISSION # CC646781 EXPIRES

May 13, 2001

BONDED THRU TROY FAIR INSURANCE, INC.

FILED
98 JUL 24 AM 11:14
TALLAHASSEE, FLORIDA

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as statutory registered agent for SW PROPERTIES I, LTD. a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, I hereby agree to act in that capacity, and, on behalf of the Partnership, to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

REGISTERED AGENT:

ICARD, MERRILL, CULLIS, TIMM,
FUREN & GINSBURG, P.A.

By: 

Robert E. Messick, Its authorized agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA