

A980000001890



TEMPUS RESORTS
INTERNATIONAL

7380 Sand Lake Road
Suite 600
Orlando, FL 32819

Phone #

Office Use Only

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

1. _____ A98-1890
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

8000003119988-0
-02/01/00--01149--009
***1750.00 ***1750.00

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- | | | |
|------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time | <input type="checkbox"/> Certified Copy |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait | <input type="checkbox"/> Certificate of Status |
| <input type="checkbox"/> Photocopy | | |

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED
00 FEB - 11 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mtu
2/3



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of Tempus Resorts Management, Ltd.

_____, a
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 850,304

This 31 day of December, 19 99

FURTHER AFFIANT SAYETH NOT.

*Under penalties of perjury I declare that I have read the foregoing and that the facts are true to
the best of my knowledge and belief.*

General Partner(s)

TPI Holdings, LLC

By: [Signature]

As its: Authorized Agent

FEES:

\$7 per \$1,000 based on the additional contributions
(Minimum \$52.50 - Maximum \$1,750.00)

INHSE20(3/95)