

A98000001981



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 937419 7112677

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : August 24, 1998

ORDER TIME : 10:54 AM

ORDER NO. : 937419-005

CUSTOMER NO: 7112677

CUSTOMER: Mr. Jeffrey S. Hoffman
WILSON & JOHNSON, P.A.

821 5th Avenue South
Mezanine Level
Naples, FL 33940

600002623106--2

-08/24/98-01063-020

***1837.50 ***1837.50

DOMESTIC FILING

NAME: THE BACIG FAMILY LIMITED
PARTNERSHIP

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 AUG 24 PM 12:45

(4)

RECEIVED
98 AUG 24 PM 12:09
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
THE BACIG FAMILY LIMITED PARTNERSHIP**

The undersigned General Partner, desiring to form a limited partnership (the "Partnership") pursuant to the Florida Revised Uniform Limited Partnership Act (1986), Sections 620.101-620.192 of the Florida Statutes, hereby states the following:

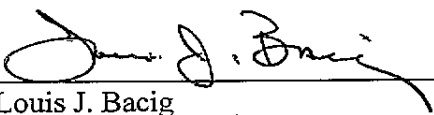
1. The name of the Partnership is "The Bacig Family Limited Partnership."
2. The address of the office of the Partnership, as referred to in Section 620.105 of the Florida Statutes, is 3391 Riverpark Court, Bonita Springs, FL 34134.
3. The name and address of the agent for service of process on the Partnership shall be Louis J. Bacig at 3391 Riverpark Court, Bonita Springs, FL 34134.
4. The name and business address of the General Partner are:

<u>Name</u>	<u>Address</u>
Louis J. Bacig	3391 Riverpark Court Bonita Springs, FL 34134

5. The mailing address for the Partnership is 3391 Riverpark Court, Bonita Springs, FL 34134.
6. The latest date upon which the Partnership shall dissolve is December 31, 2038.
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 or on behalf of any General Partner. Any person dealing with the Partnership or its property shall be entitled to rely fully upon any deed, mortgage, bill of sale, contract, lease, sublease, note or other written instrument signed by or on behalf of any General Partner in the name of and/or on behalf of the Partnership.

This Certificate of Limited Partnership was executed by the General Partner this 20 day of August, 1998.

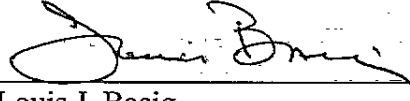
GENERAL PARTNER:


Louis J. Bacig

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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 designation and agree to act in such capacity, and I further agree to comply with the provisions of all statutes relevant to the proper and complete performance of my duties as registered agent. I am familiar with, and accept the duties and obligations of, Section 620.192 of the Florida Statutes.



Louis J. Bacig

Date: August 20, 1998

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DIVISION OF CORPORATIONS
98 AUG 24 PM 12:45

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STATE OF MINNESOTA

COUNTY OF RAMSEY

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Louis J. Bacig, general partner of THE BACIG FAMILY LIMITED PARTNERSHIP, a Florida limited partnership "Partnership"), of Lee 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 \$98.00.

2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$588,000.

FURTHER AFFIANT SAITH 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:

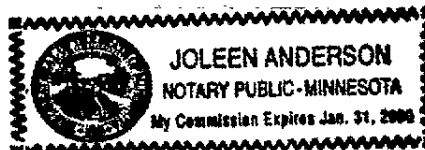
Date: August 20, 1998

Louis J. Bacig
Louis J. Bacig

Sworn to and subscribed before me this 20 day of August, 1998, by LOUIS J. BACIG. Said person (check one) ☐ is personally known to me, ☒ produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or ☐ produced other identification, to wit: Joleen Anderson

Print Name: Joleen Anderson
Notary Public, State of Minnesota
Commission No.: 1-31-00
My Commission Expires: _____

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