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DATE: .	9-9	
CONTACT:	CINDY HICKS	SE M
FROM:	CORPORATE & CRIMINAL RESEARCH SERVICES	9 7
	103 N. MERIDIAN STREET	
	TALLAHASSEE、FL 32301	- 6
TELEPHONE:	222-1173	
SUBJECT:	ECOVENTURE ASSOCIATES I,	<u> </u>
STATE FEES PREPAID WE PLEASE FILE:	TH CHECK # 3170 FOR \$ 16.29 80000263 -03/09/98- *****36.2	= 50688 -01038022 5 *****86.25
() ARTICLES OF INC.	() AMENDMENT () DISSOLUTION	•
() ANNUAL REPORT	() MERGER () WITHDRAWAL	•
() QUALIFICATION	LIMITED PARTNERSHIP () ANNUAL REPORT	'n
() FICTITIOUS NAME	() LIMITED LIABILITY () REINSTATEMENT	15/
() TRADEMARK/SERVICE	() UCC-1 () UCC-3	
PROVIDE US WITH:		9/9/2
() CERTIFIED COPY	() CERTIFICATE OF STATUS () STAMPED CO	DPY 15

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP OF ECOVENTURE ASSOCIATES I, LTD.

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 *ECOVENTURE* ASSOCIATES I, LTD.
- 2. <u>Address of Recordkeeping Office; Agent for Service of Process</u>. The records to be kept pursuant to Florida Statute Section 620.106 shall be located at 601 Bayshore Boulevard, Suite 960, Tampa, Florida 33606. The name of the Partnership's agent for service of process at said address is Edward R. Oelschlaeger.
- 3. <u>Name and Business Address of the General Partner</u>. The name and address of the General Partner is as follows:

Name

Address

Ecoventure Residences I, Inc.

₹ 9 8 UUUÐI 7738

601 Bayshore Boulevard Suite 960

Tampa, Florida 33606

- 4. <u>Mailing Address for the Limited Partnership</u>. The mailing address for the Partnership shall be located at 601 Bayshore Boulevard, Suite 960, Tampa, Florida 33606.
- 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 the Partnership.

DATED this The day of September 1998.

GENERAL PARTNER:

ECOVENTURE RESIDENCES I, INC., a Florida corporation

Édward R. Oelschlaeger, President

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this September, 1998, by Edward R. Oelschlaeger, as President of Ecoventure Residences I, Inc., a Florida corporation. He is personally known to me or has produced as identification.

> NOTARY PUBI Name: Serial No.

Commission No. CC 539573 My Commission Expires 03/28/00

Bonnie K. Kirkbride Notary Public, State of Florida

My Commission Expiresty - Fiz Notary Service & Bonding Co. วิเกษต์เลยเลยเลยเลยเลยเลยเลยเลยเลยเลยเลยเลย

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within-named 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.

Edward R. Oelschlaeger

Dated: Sectember 7, 1998

3099-252-600296.1

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

I, Edward R. Oelschlaeger, being the President of Ecoventure Residences I, Inc., a Florida corporation, as the sole general partner of ECOVENTURE ASSOCIATES I, LTD., a Florida limited partnership (hereinafter referred to as the "Partnership"), upon being sworn, do hereby certify as follows:

- 1. The limited partner of the Partnership has contributed \$1.00 of capital to the Partnership.
- 2. It is anticipated that no additional capital shall be contributed to the capital of the Partnership by the limited partner(s) in the future.

This 7th day of september, 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:

ECOVENTURE RESIDENCES I, INC., a Florida corporation

Edward R. Oelschlaeger,

President

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this the day of RESIDENCES I, INC., a Florida corporation. He is personally known to me or has produced as identification.

NOTARY PUBLI@mmmmmmmmuaaaaaaaaa

Name:___

Serial No. <u>% 4. A.</u>
My Commission Expires:

Bonnie K. Kirkbride

Notary Public, State of Florida

Commission No. CC 539573

My Commission Expires 03/28/00