

A9800000 2735

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REFERENCE:

0171.4837

DATE:

12-11-98

CONTACT:

CINDY HICKS

FROM:

CORPORATE & CRIMINAL RESEARCH SERVICES

103 N. MERIDIAN STREET

TALLAHASSEE, FL 32301

222-1173

TELEPHONE:

SUBJECT:

Ivey's Nursery Partnership,  
Ltd.

STATE FEES PREPAID WITH CHECK #

9028

FOR \$

1,837.50

PLEASE FILE:

( ) ARTICLES OF INC.

( ) AMENDMENT

( ) DISSOLUTION

( ) ANNUAL REPORT

( ) MERGER

( ) WITHDRAWAL

( ) QUALIFICATION

(X) LIMITED PARTNERSHIP

( ) ANNUAL REPORT

( ) FICTITIOUS NAME

( ) LIMITED LIABILITY

( ) REINSTATEMENT

( ) TRADEMARK/SERVICE

( ) UCC-1

( ) UCC-3

PROVIDE US WITH:

(X) CERTIFIED COPY

( ) CERTIFICATE OF STATUS

( ) STAMPED COPY

Examiner's Initials

BRT  
12/11/98

FILED  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
98 DEC 11 PM 12:57

RECEIVED  
98 DEC 11 11:30  
DIVISION OF CORPORATIONS

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-12/11/98-01043-022  
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**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
IVEY'S NURSERY PARTNERSHIP, LTD.**

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 DEC 11 PM 12:57

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

1. The name of the Partnership is "Ivey's Nursery Partnership, Ltd."
2. The address of the Partnership as referred to in Section 620.105, Florida Statutes, is 6980 Luck Lane, Orlando, Florida 32811.
3. The name and address of the agent for service of process on the Partnership shall be Robert L. Ivey, Jr. 6980 Luck Lane, Orlando, Florida 32811.
4. The name and business address of the General Partner are as follows:  
  
Ivey's Nursery, Inc., a Florida corporation  
6980 Luck Lane  
Orlando, Florida 32811 659329
5. The mailing address for the Partnership is 6980 Luck Lane, Orlando, Florida 32811.
6. The latest date upon which the Partnership shall be dissolved is December 31, 2048.
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 name of the Partnership by the General Partner.

10<sup>th</sup> This Certificate of Limited Partnership was executed by the General Partner this day of December, 1998.

GENERAL PARTNER:

IVEY'S NURSERY, INC.

By: \_\_\_\_\_

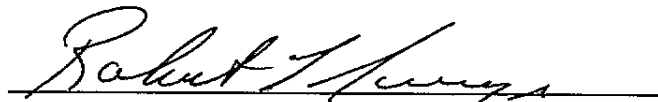
Robert L. Ivey, Jr., President

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DIVISION OF CORPORATIONS  
98 DEC 11 PM 12:57

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for the above referenced partnership, at the place designated in the foregoing Certificate of Limited Partnership, I hereby accept such appointment and agree to act in such capacity. I further agree to comply with the provisions of all statutes relevant to the proper and complete performance of the duties of a registered agent. I am familiar with, and accept the duties and obligations of, Section 620.192 of the Florida Statutes.

REGISTERED AGENT:

  
Robert L. Ivey, Jr.

Date: December 10, 1998

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STATE OF FLORIDA

COUNTY OF ORANGE

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, personally appeared ROBERT L. IVEY, JR., President of IVEY'S NURSERY, INC., the sole general partner of IVEY'S NURSERY PARTNERSHIP, LTD., a Florida limited partnership (the "Partnership"), of Orange 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 \$ 750,000.00.

2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$ -0-.

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

IVEY'S NURSERY, INC.

Date: December 10, 1998

By: Robert L. Ivey, Jr.  
Robert L. Ivey, President

Sworn to and subscribed before me this 10<sup>th</sup> day of December, 1998, by Robert L. Ivey, President of IVEY'S NURSERY, INC., as General Partner on behalf of IVEY'S NURSERY PARTNERSHIP, LTD., a Florida limited partnership. <sup>He</sup>She (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: \_\_\_\_\_.

NOTARY PUBLIC - STATE OF FLORIDA  
STEPHEN D. DUNEGAN  
COMMISSION # CC755863  
EXPIRES 7/4/2002  
BONDED THRU ASA 1-888-NOTARY1

Stephen D. Dunegan  
Print Name: \_\_\_\_\_  
Notary Public, State of Florida  
My Commission Expires: \_\_\_\_\_  
Commission Number: \_\_\_\_\_