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AW OFFICE
CARPENTER & PARRISH, P.A.
5608 NW 13th STREET
GAINESVILLE, FLORIDA 32653-8334

TELEPHONE
(352) 373-7788
FACSIMILE
(352) 373-1114

RONALD A. CARPENTER

SHARON D. PARRISH

April 15, 1999

Florida Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

100002844071--6
-04/19/99-01117-008
***140.00 ***140.00

Re: GAINESVILLE COMMERCE CENTER LIMITED PARTNERSHIP

Ladies and Gentlemen:

Please find enclosed with this letter the following documents on the above referenced limited partnership:

1. Certificate of Limited Partnership;
2. Affidavit of Capital Contributions for Florida Limited Partnership; and
3. Our firm's trust check #2803 in the amount of \$140.00 for the following costs:

a)	Certificate & Affidavit	\$52.50
b)	Designation of registered agent	35.00
c)	Certificate copy	<u>52.50</u>

Total: \$140.00

Please return the certified copy to my office at your earliest convenience. Your cooperation in this matter is greatly appreciated.

Sincerely yours,

Barbara M. Wilhite

Barbara M. Wilhite
Legal Assistant

/bw
Enclosures

FILED
99 APR 19 PM 5:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Name	<i>Barbara M. Wilhite</i>
Availability	<i>4-20</i>
Document	<i>[Signature]</i>
Director	<i>[Signature]</i>
Secretary	<i>[Signature]</i>
Assistant Secretary	<i>[Signature]</i>
W. P. V. [Signature]	

CERTIFICATE OF LIMITED PARTNERSHIP

1. The name of the limited partnership is **GAINESVILLE COMMERCE CENTER LIMITED PARTNERSHIP.**

2. The business address of the limited partnership is:

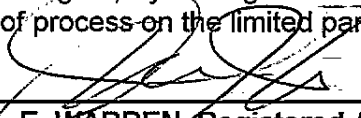
**GAINESVILLE COMMERCE CENTER LIMITED PARTNERSHIP
c/o AMJ Inc. of Gainesville
502 NW 16th Avenue
Gainesville, Florida 32601**

3. The name of the Registered Agent for service of process is **MICHAEL E. WARREN.**

4. The Florida street address of the Registered Agent is:

**c/o AMJ Inc. of Gainesville
502 NW 16th Avenue
Gainesville, Florida 32601**

5. **MICHAEL E. WARREN**, the Registered Agent, by his signature below, hereby accepts designation as Registered Agent for service of process on the limited partnership.



MICHAEL E. WARREN, Registered Agent

6. The mailing address of the limited partnership is:

**GAINESVILLE COMMERCE CENTER LIMITED PARTNERSHIP
c/o AMJ Inc. of Gainesville
502 NW 16th Avenue
Gainesville, Florida 32601**

7. The latest date upon which the limited partnership is to be dissolved is **December 31, 2049.**

8. The name and address of the general partner is:


**AMJ Inc. of Gainesville
502 NW 16th Avenue
Gainesville, Florida 32601**

526352

Under penalties of perjury the undersigned General Partner declares that it has read the foregoing and knows the contents thereof and that the facts stated herein are true and correct.

Signed this 9th day of April, 1999.

AMJ INC. OF GAINESVILLE, General Partner

By: 

Michael E. Warren, President

FILED
9 APR 19 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

The undersigned, constituting all of the general partners of **GAINESVILLE COMMERCE CENTER LIMITED PARTNERSHIP**, a Florida Limited Partnership, certify:

1. The amount of capital contributions to date of the limited partners is **\$990.00**.

2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals **\$990.00**.

FURTHER AFFIANT SAYETH NOT.

SIGNED this 9th day of April, 1999.

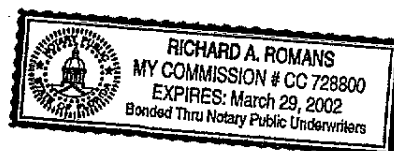
Under penalties of perjury the undersigned General Partner declares that it has read the foregoing and knows the contents thereof and that the facts stated herein are true and correct.

AMJ INC. OF GAINESVILLE, General Partner

By: 
Michael E. Warren, President

SWORN TO AND SUBSCRIBED
before me this 9th day of April, 1999,
by Michael E. Warren as President of
the AMJ Inc. of Gainesville, the
General Partner of GAINESVILLE
COMMERCE CENTER LIMITED
PARTNERSHIP. Michael E. Warren
is personally known to me or
 presented his _____
as identification.


Notary Public



FILED
99 APR 19 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA