



**THE UNITED STATES
CORPORATION
COMPANY**

A99000000927

ACCOUNT NO. : 072100000032

REFERENCE : 263556 4732152

AUTHORIZATION :

COST LIMIT : \$ 1144.50

Patricia Pujol

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
99 JUN - 9 PM 3:17

ORDER DATE : June 4, 1999

ORDER TIME : 2:55 PM

ORDER NO. : 263556-005

CUSTOMER NO: 4732152

600002896076--7

CUSTOMER: Winfield A. Gartner, Esq
GARTNER BROCK & SIMON
GARTNER BROCK & SIMON
Suite 203
1660 Prudential Drive
Jacksonville, FL 32207

DOMESTIC FILING

NAME: SKYLINE LIMITED PARTNERSHIP

EFFECTIVE DATE: (6)

ARTICLES OF INCORPORATION
XX 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: _____

RECEIVED
99 JUN - 7 AM 8:59
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
FILING OFFICE

BKC/9/99



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 7, 1999

JANNA WILSON
CSC NETWORKS
TALLAHASSEE, FL

SUBJECT: SKYLINE LIMITED PARTNERSHIP
Ref. Number: W99000013144

We have received your document for SKYLINE LIMITED PARTNERSHIP and the authorization to debit your account in the amount of \$1144.50. However, the document has not been filed and is being returned for the following:

The limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

ALSO, PLEASE NOTE that the TOTAL AMOUNT required to file this partnership and to obtain a certified copy is \$1,179.50. Please call or write to authorize us to change the cost limit amount on your cover sheet. (Please note that the required \$35.00 R.A. fee was left out when the total was calculated to be \$1,144.50.).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr
Corporate Specialist

RESUBMIT

Please give original
submission date as file date.

Letter Number: 899A00030655

~~New Name - Skyline-Jax Limited Partnership~~

~~1179.50~~

~~Patricia Pugh~~

CERTIFICATE OF
LIMITED PARTNERSHIP
OF SKYLINE -Jax Limited Partnership

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUN -9 PM 3:27

The undersigned, desiring to form a limited partnership under the laws of the State of Florida, do hereby certify as follows:

1. The name of the limited partnership is Skyline — Jax Limited Partnership
2. The mailing address of the partnership is 601 Riverside Avenue, Building II, Suite 650, Jacksonville, Florida 32204.
3. The name and principal business address of the general partner of the partnership is Riverside Office Investors, LLC, a Florida limited liability company, 601 Riverside Avenue, Building II, Suite 650, Jacksonville, Florida 32204.
4. The term for which the partnership shall exist shall commence on the date hereof and shall continue for thirty (30) years from such date, unless the partnership is sooner dissolved and terminated as provided by law or in the Agreement of Limited Partnership by which the partnership shall be governed.
5. The street address of the registered office for the partnership is 601 Riverside Avenue, Building II, Suite 650, Jacksonville, Florida 32204, and the name of the registered agent for service of process at that address is R. Lamar Shaw, Jr., who is joining in the execution hereof for the purpose of accepting the appointment as registered agent for service of process for the partnership.

IN WITNESS WHEREOF, the undersigned have executed this Certificate this 27 day of June, 1999.

General Partner:

RIVERSIDE OFFICE INVESTORS, LLC,
a Florida limited liability company

By: Skyline Realty Services, Inc.,
a Florida corporation, its manager

By: R. Lamar Shaw, Jr.
R. Lamar Shaw, Jr., President

Registered Agent:

By: R. Lamar Shaw, Jr.
R. Lamar Shaw, Jr.

AFFIDAVIT REGARDING
CAPITAL CONTRIBUTIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUN -9 PM 3:27

BEFORE ME, the undersigned authority personally appeared R. Lamar Shaw, Jr, the President of Skyline Realty Services, Inc., the manager of Riverside Office Investors, LLC, who being first duly sworn, declared as follows:

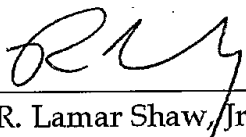
1. That Riverside Office Investors, LLC, a Florida limited liability company, is the general partner of Skyline Jax Limited Partnership.
2. The capital contributions to said limited partnership as of the date hereof total \$1,000.00.
3. It is anticipated that the limited partners will contribute an additional \$150,000.00 to the partnership on or prior to December 31, 1999.
4. This Affidavit is given in compliance with the provisions of Florida Revised Uniform Limited Partnership Act (1986).

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:

Riverside Office Investors, LLC, a Florida
limited liability company

By: Skyline Realty Services, Inc., a
Florida corporation, its manager

By: 
R. Lamar Shaw, Jr., its President

STATE OF FLORIDA
COUNTY OF DUVAL

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUN -9 PM 3:27

The foregoing instrument was acknowledged before me this 2nd day of June, 1999, by R. Lamar Shaw, Jr., the President of Skyline Realty Services, Inc., a Florida corporation, the manager of Riverside Office Investors, LLC, a Florida limited liability company, on behalf of the company, who is either ☒ personally known to me or ☐ has produced _____ identification.



Tristan Hoffman
Notary Public, State of Florida
Print Name: Tristan Hoffman
My Commission Expires:

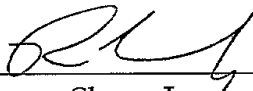
CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the limited partnership is: Skyline -Jax Limited Partnership
2. The name and address of the registered agent and office is:

R. Lamar Shaw, Jr.
601 Riverside Avenue
Building II, Suite 650
Jacksonville, Florida 33204

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



R. Lamar Shaw, Jr.

Date: June 2, 1999

FILED IN STATE
SECRETARY OF CORPORATIONS
99 JUN -9 PM 3:27