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ČONTACT:	CINDY HICKS		e alee
DATE:	6-16-99	- 1000029062 -06/16/9901	016019
REF. #:	0171.7191		***1837.50
CORP. NAME:	mme Boca	Grande, Lte	<u>L</u>
( ) ARTICLES OF INCORPOR	ATION ( ) ARTICLES OF AMENDMENT	( ) ARTICLES OF DISSOLUTION	ON THE
( ) ANNUAL REPORT	( ) TRADEMARK/SERVICE MARK	( ) FICTITIOUS NAME	
( ) CERT. OF AUTHORITY	LIMITED PARTNERSHIP	( ) LIMITED LIABILITY 5	
( ) REINSTATEMENT	( ) MERGER	( ) WITHDRAWAL	ಷ್ಟಂ 
( ) CERTIFICATE OF CANCE	LLATION ( ) UCC-1	( ) UCC-3	RAT
( ) OTHER:	<del></del>		<u> </u>
STATE FEES PREPA	ID WITH CHECK# <u>49/3</u>	FOR \$ 1837.50	
AUTHORIZATION F	OR ACCOUNT IF TO BE DEBIT	ED:	
	COST L	MIT: \$	
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PLEASE RETURN:		Bu 6/10	199
) CERTIFIED COPY	VOINO 14°33SSYHY TYV SKULLYNOLNOO HO NOISIAIG HIVLY (1°) CERTIFICATE OF STA	TUS () PLAIN STAMPE	COPY
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Examiner's Initials	Transit of the Control of the Contro		

# CERTIFICATE OF LIMITED PARTNERSHIP OF MML BOCA GRANDE, LTD.

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, Sections 620.101 through 620.186 of the Florida Statutes, hereby states the following:

- 1. The name of the Partnership is MML Boca Grande, Ltd.
- 2. The address of the office of the Partnership as referred to in Section 620.108, Florida Statutes, is 100 North Tampa Street, Suite 2120, Tampa, Florida 33602.
- 3. The name of the agent for service of process on the Partnership shall be John H. Mueller.
  - 4. The name and business address of the General Partner are:

Name

Address

MML Boca Grande, Inc.

100 North Tampa Street, Suite 2120

P9900054784 Tampa, Florida 33602

- 5. The mailing address for the Partnership is P. O. Box 2939, Tampa, Florida 33601.
- 6. The latest date upon which the Partnership shall dissolve is December 31, 2049.
- 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 the General Partner.

This Certificate of Limited Partnership was executed by the General Partner this 12 day of June, 1999.

GENERAL PARTNER

MML BOCA GRANDE, INC., a Florida corporation

SUSAN L. MUELLAR, President

## ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

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

REGISTERED AGENT

ohn H. Mueller

Date: June 12, 1999

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#### STATE OF FLORIDA

#### COUNTY OF HILLSBOROUGH

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Susaw L. Muslier.

President of MML BOCA GRANDE, INC., the sole general partner of MML BOCA GRANDE, Susan Entry, a Florida limited partnership (the "Partnership"), of Hillsborough 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 \$1,139,520.00, consisting of a 100% undivided interest in real property.
- 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

MML BOCA GRANDE, INC.

Date: June 14, 1999	BY: SUBBLE CAT I WELLE
<i>pato. vario</i> <u>, , , , , , , , , , , , , , , , , , ,</u>	SUSAN L. MUEILER, President
Sworn to and subso	cribed before me this 14th day of Tunk, 1999, by resident of MML BOCA GRANDE, INC., as General Partner
on behalf of MMI. BOCA GRAN	DE, LTD., a Florida limited partnership. Said person (check
one) $\square$ is personally known to me	. □ produced a driver's license (issued by a state of the United
States within the last five (5) years	s) as identification, or D produced other identification, to
wit:	•
OFFICIAL NOTARY SEAL	Ochna E. Lout
DEBORA E LANT	Print Name: Debora E. Lant
OTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC611946	Notary Public - State of Florida
MY COMMISSION EXP. FEB. 23,2003	Commission No.:
	My Commission Expires: