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TALLAHASSEE, FL 32301 222-1173

# FILING COVER SHEET ACCT. #FCA-14

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CONTACT:	CINDY HICKS	7000029182279 -06/29/9901021013
DATE:	<u> 629 99                                 </u>	***1785.00 ***1785.00
REF. #:	0170.7367	
CORP. NAME:	Dewport Partners	XLITI, UTP
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( ) ARTICLES OF INCORPORT ( ) ANNUAL REPORT ( ) CERT. OF AUTHORITY ( ) REINSTATEMENT ( ) CERTIFICATE OF CANCE ( ) OTHER:	) TRADEMARK/SERVICE MARK ) LIMITED PARTNERSHIP ( ) MERGER	() ARTICLES OF DISSOLUTION () FICTITIOUS NAME () LIMITED LIABILITY () WITHDRAWAL () UCC3 () UCC3 () 3
STATE FEES PREPAID AUTHORIZATION FOR	WITH CHECK# <u>OP  </u> FOR \$ ACCOUNT IF TO BE DEBITED: COST LIMIT: \$	78500
PLEASE RETURN:		<b>5</b>
CERTIFIED COPY	( ) CERTIFICATE OF STATE	us ( ) Plain Stamped Copy
	<u> </u>	SK (129/99)

Examiner's Initials

## <u>CERTIFICATE OF LIMITED PARTNERSHIP</u> <u>OF</u> <u>NEWPORT PARTNERS XLIII, LTD.</u>

Source and to source and to source and to

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act, Sections 620.101 through 620.205 of the Florida Statutes, hereby states the following:

- 1. The name of the Partnership is Newport Partners XLIII, Ltd.
- 2. The address of the office of the Partnership as referred to in Section 620.108, Florida Statutes, is 300 International Parkway, Suite 270, Heathrow, Florida 32746.
- 3. The name of the agent for service of process on the Partnership shall be Peter S. Cahall, 300 International Parkway, Suite 270, Heathrow, Florida 32746.
  - 4. The name and business address of the General Partner are:

Newport Partners, Inc.

300 International Parkway
Suite 270
Heathrow, Florida 32746

- 5. The mailing address for the Partnership is 300 International Parkway, Suite 270, Heathrow, Florida 32746.
- 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 \_\_\_\_\_ day of \_\_\_\_\_\_, 1999.

General Partner:

NEWPORT PARTNERS, INC., a Florida corporation

By:

Peter S. Cahall, President

# Acceptance of Appointment As Registered Agent

Having been named as registered agent for the above-named Partnership, at the 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. I am familiar with, and accept the duties and obligations of, Section 620.192 of the Florida Statutes.

Registered Agent:

Peter S. Cahall

Date: 6-24, 1999

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#### STATE OF FLORIDA

#### COUNTY OF SEMINOLE

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared PETER S. CAHALL, President of NEWPORT PARTNERS, INC., the sole general partner of NEWPORT PARTNERS XLIII, LTD., a Florida limited partnership (the "Partnership"), of Seminole 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 \$2,105,885.
- 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:

	NEWPORT PARTNERS, INC.
Date: <u>6-24</u> , 1999	By: Peter S. Cahall, President
CAHALL, President of NEWPORT PARTY	ore me this 24 day of, 1999, by PETER S. NERS, INC., as General Partner on behalf of NEWPORT I partnership. He (check one) is personally known to a state of the United States within the last five (5) years) tification, to wit:
	Bornes Dicon
	Print Name: BONNIE L. PRATTE
	Notary Public - State of Florida  Commission No.:
	My Commission Expires:

