

CCRS

103 N. MERIDIAN STREET, TALLAHASSEE, FL 32301
222-1173

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ACCT. #FCA-14

A99000001791

CONTACT:

CINDY HICKS

DATE:

11/2/99

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-11/02/99--01040--014

***1837.50 ***1837.50

REF. #:

0171.8958

CORP. NAME:

Ellis Partnership, LTD.

() ARTICLES OF INCORPORATION

() ARTICLES OF AMENDMENT

() ARTICLES OF DISSOLUTION

() ANNUAL REPORT

() TRADEMARK/SERVICE MARK

() FICTITIOUS NAME

() FOREIGN QUALIFICATION

☒ LIMITED PARTNERSHIP

() LIMITED LIABILITY

() REINSTATEMENT

() MERGER

() WITHDRAWAL

() CERTIFICATE OF CANCELLATION () UCC-1

() UCC-3

() OTHER:

99 NOV -2 PM 2:05

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

STATE FEES PREPAID WITH CHECK#

1232

FOR \$ 1,837.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

BYC @ 11/2/99

COST LIMIT: \$

PLEASE RETURN:

☒ CERTIFIED COPY

() CERTIFICATE OF GOOD STANDING

() PLAIN COPY

() CERTIFICATE OF STATUS

Examiner's Initials

BYC 11/2/99

RECEIVED
99 NOV -2 AM 10:44
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
ELLIS PARTNERSHIP, LTD.**

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
99 NOV -2 PM 2:05

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 "Ellis Partnership, Ltd."
2. The address of the office of the Partnership is 34041 Parkview Avenue, Eustis, Florida 32726. This is also the Partnership's mailing address.
3. The name of the agent for service of process on the Partnership shall be Laura R. Ellis, 34041 Parkview Avenue, Eustis, Florida 32726.
4. The name and business address of the General Partner is: Laura R. Ellis, as Trustee, 34041 Parkview Avenue, Eustis, Florida 32726.
5. The latest date upon which the Partnership shall be dissolved is December 31, 2049.
6. 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 any one or more of the General Partners.

This Certificate of Limited Partnership was executed by the General Partner this 27th day of October, 1999.

"GENERAL PARTNER"

Laura R. Ellis

Laura R. Ellis, as Trustee

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 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



Laura R. Ellis

Date: October 27, 1999

G:\TAX\UHW\Ellis-clp.wpd

STATE OF FLORIDA
COUNTY OF LAKE

RECEIVED BY STATE
CLERK OF COMMISSIONS
99 NOV -2 PM 2:05

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared LAURA ELLIS, the General Partner of Ellis Partnership, Ltd., a Florida limited partnership (the "Partnership"), of Lake 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 \$ 2,373,619.00.
2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$-0-.

FURTHER AFFIANT SAITH 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"

Laura R. Ellis
Laura R. Ellis, as Trustee

Dated: 10/27, 1999

Sworn to and subscribed before me this 27th day of October 1999, by Laura R. Ellis. 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:

Print Name: Elizabeth M. Fisher
Notary Public - State of Florida
Commission No.: CC835816
My Commission Expires: May 11th, 2003