

# ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: 30000000005

REFERENCE: 202565-4  
(Sub Account)

DATE: 5-16

REQUESTOR NAME: Lexis Document Services

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: (\_\_\_\_) (\_\_\_\_ - \_\_\_\_ ) ext (\_\_\_\_)

CONTACT NAME: \_\_\_\_\_

CORPORATION NAME: Armenia Associates L.P.

DOCUMENT NUMBER: \_\_\_\_\_  
(if applicable)

AUTHORIZATION: Gynthia J. Woodyard

- ☒ CERTIFIED COPY (1-9)
- ☒ CERTIFICATE OF STATUS (1-9)
- ☒ PLAIN STAMPED COPY

300003254553-2

- |                     |                     |                |
|---------------------|---------------------|----------------|
| ( ) Call When Ready | ( ) Call if Problem | ( ) After 4:30 |
| ( ) Walk In         | ( ) Will Wait       | ( ) Pick Up    |
| ( ) Mail Out        |                     |                |

*3K*  
*5/12*

RECEIVED  
00 MAY 16 PM 12:53  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 MAY 18 PM 3:29

**B000000000161**



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 16, 2000

LEXIS

TALLAHASSEE, FL

SUBJECT: ARMENIA ASSOCIATES L.P.  
Ref. Number: W00000012773

We have received your document for ARMENIA ASSOCIATES L.P. and the authorization to debit your account in the amount of \$148.75. However, the document has not been filed and is being returned for the following:

Before this partnership can be filed, its general partner BLACKHAWK ARMENIA L.P. must be qualified in Florida.

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

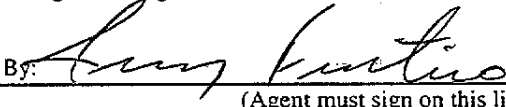
Letter Number: 000A00027575

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 MAY 18 PM 3:29

RECEIVED  
00 MAY 18 PM 12:28  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 MAY 18 PM 3:29

1. Armenia Associates L.P.  
(Name of limited partnership as it is in the home state)
2. Not Applicable  
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida must contain the word "LIMITED" or "LTD.")
3. Illinois 4. April 28, 2000  
(State of Formation) (Date of Formation)
5. Lexis Document Services Inc.  
(Name of Registered Agent for Service of Process)
6. 3953 W. W. Kelley Road  
(Street Address of Registered Office)  
Tallahassee, Florida 32311  
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:  
By:   
(Agent must sign on this line)
8. 100 North LaSalle Street, Suite 910  
Chicago, Illinois 60602  
(Address of registered office required in state of formation or, if not required, address of principal of office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS  

<u>Blackhawk Armenia L.P.</u>	<u>100 North LaSalle Street, Suite 910</u>
<u>(an Illinois limited partnership)</u>	<u>Chicago, Illinois 60602</u>

000000000160
10. 100 North LaSalle Street, Suite 910, Chicago, Illinois 60602  
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. 100 North LaSalle Street, Suite 910, Chicago, Illinois 60602

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 20th day of April, 2000

BLACKHAWK ARMENIA L.P., General Partner  
By: BLACKHAWK ARMENIA, INC., General Partner

By: [Signature]  
STATE OF ILLINOIS Gary S. Richman, President

COUNTY OF COOK

On this 20th day of April, 2000

Gary S. Richman personally appeared before me,

☒ who is personally known to me

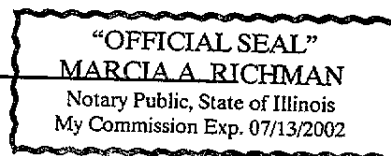
☐ whose identity I proved on the basis of \_\_\_\_\_

[Signature]  
(Notary Public Signature)

MARCIA A. RICHMAN  
(Notary's Printed Name)

Seal

My Commission Expires: \_\_\_\_\_



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 MAY 18 PM 3:29

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

Gary S. Richman, President of Blackhawk Armenia, Inc.,  
General Partner of Blackhawk Armenia L.P.

BEFORE ME the undersigned personally appeared \_\_\_\_\_,  
a general partner of Armenia Associates L.P., (an) Illinois

limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 2,000.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 2,000.00.

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 20<sup>th</sup> day of April, 2000

ARMENIA ASSOCIATES L.P.

By: BLACKHAWK ARMENIA L.P., General Partner

By: BLACKHAWK ARMENIA, INC., General Partner

By: \_\_\_\_\_

Gary S. Richman, President

STATE OF Illinois

COUNTY OF COOK

On this 20<sup>th</sup> day of April, 2000

Gary S. Richman \_\_\_\_\_, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

\_\_\_\_\_  
(Notary Public signature)

MARCIA A. RICHMAN  
(Notary's Printed Name)

Seal

My Commission Expires:

