

IRS MANAGEMENT, INC.

A Subsidiary of Rupp Financial, Inc.

300000000201

29 June 2000

Brenda Tadlock
Fl Dept of State
Div of Corporations
409 E Gaines St
Tallahassee FL 32399

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JUN 30 AM 8:55

Re: Eastwood Limited Partnership
Malaki Limited Partnership

Dear Ms. Tadlock,

300003310363-8
-06/30/00--01079--001
****805.00 ****367.50

Enclosed, please find Application for Foreign Limited Partnership on the above named properties. We have enclosed a check which breaks down as follows:

Malaki Limited Partnership
 $40,000 \times 7 = 280.00$
Reg Agent = 35.00
Certified copy = 52.50
TOTAL: 367.50

Eastwood Limited Partnership
 $50,000 \times 7 = 350.00$
Reg Agent = 35.00
Certified copy = 52.50
TOTAL: 437.50

Any help you can give us in expediting these Limited Partnerships would be greatly appreciated.

Sincerely,


Danny J Sumner
Agent

DJS:wjs

Enclosures

Name	6/30/00
Availability	
Document Examiner	alt
Updater	
Updater	
Verifier	
Acknowledgement	
W. P. Verifier	

FOR LP
alt 6/30
1000-14768
BILLING 280.00
COPY 52.50
AGENT 35.00
TOTAL 367.50
BALANCE DUE \$
REFUND \$

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

1. Malaki Limited Partnership
(Name of limited partnership as it is in the home state)

2. _____
(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.")

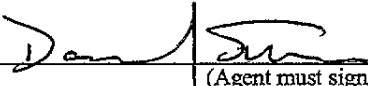
3. Mississippi 4. 26 June 2000
(State of Formation) (Date of Formation)

5. Danny J Sumner
(Name of Registered Agent for Service of Process)

6. 608 S Tyndall Pkwy
(Street Address of Registered Office)

Panama City, Florida 32404
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:


(Agent must sign on this line)

8. 2301 14th St. Suite 600

Gulfport MS 39501
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

<u>Steven N Rupp</u>	<u>1250 24th St NW Suite 300</u>
	<u>Washington DC 20037</u>

10. 608 S Tyndall Pkwy Panama City FL 32404
(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

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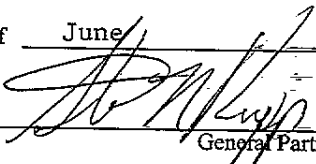
12. 608 S Tyndall Pkwy

Panama City FL 32404

(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 29th day of June, 2000


General Partner

STATE OF FLORIDA

COUNTY OF Bay

On this 29th day of June, 2000

Steven N Rupp

personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

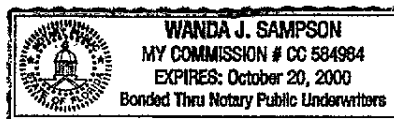

(Notary Public Signature)

Wanda J Sampson

(Notary's Printed Name)

Seal

My Commission Expires: 10-20-00



AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Steven N Rupp,
a general partner of Malaki Limited Partnership, a (an) _____
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 40,000 .
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 40,000 .

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 29th day of June, 2000 .


General Partner

STATE OF FLORIDA

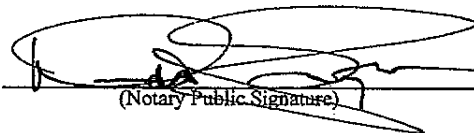
COUNTY OF Bay

On this 29th day of June, 2000 ,

Steven N Rupp, personally appeared before me,

☒ who is personally known to me

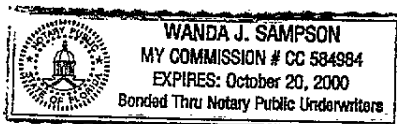
☐ whose identity I proved on the basis of _____


(Notary Public Signature)

Wanda J Sampson
(Notary's Printed Name)

Seal

My Commission Expires: 10-20-00



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