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Phone 92 235 7833

Company ST IVES INC
Address 100 N CENTRAL EXPY STE B10
RICHARDSON State TX ZIP 75080
Internal Billing Reference

700003399427--1
-09/20/00--01066--005
***1435.00 ***1435.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. (Corporation Name) (Document #)
- 2. (Corporation Name) (Document #)
- 3. (Corporation Name) (Document #)
- 4. (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED
00 SEP 19 AM 10:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
mtu
9/25

Examiner's Initials

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

1. OKEECHOBEE VENTURE NO. ONE, L. P.
(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. Texas 4. August 31, 2000
(State of Formation) (Date of Formation)

5. Cornerstone Management & Leasing, Inc.
(Name of Registered Agent for Service of Process)

6. 1936 San Marco Blvd.
(Street Address of Registered Office)

- Jacksonville, Florida 32207
(City) (Zip Code)

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

Richard M. Romano
(Agent must sign on this line)

8. 100 N. Central Expressway, Suite 810
Richardson, TX 75080
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS STREET ADDRESS

Troy Bathman 100 N. Central Expressway, #810 Richardson, TX 75080

James E. Gissler 100 N. Central Expressway, #810 Richardson, TX 75080

10. 100 N. Central Expressway, Suite 810 Richardson, TX 75080
(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.

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TALLAHASSEE, FLORIDA

12. 100 N. Central Expressway, Suite 810

Richardson, TX 75080

(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 _____ day of _____

General Partner

STATE OF _____

COUNTY OF _____

On this _____ day of _____

_____ personally appeared before me,

☐ who is personally known to me

☐ whose identity I proved on the basis of _____

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TALLAHASSEE, FLORIDA

(Notary Public Signature)

(Notary's Printed Name)

Seal

My Commission Expires: _____

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared _____,
a general partner of _____, 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 \$ 200,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 200,000.

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 _____ day of _____,

General Partner

STATE OF _____

COUNTY OF _____

On this _____ day of _____,

_____, personally appeared before me,

☐ who is personally known to me

☐ whose identity I proved on the basis of _____

(Notary Public Signature)

(Notary's Printed Name)

Seal

My Commission Expires:

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BC00000000287

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18
L. C. M. M. A. G.
Phone 972 235 7853

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Address 100 N CENTRAL EXPY STE B10
RICHARDSON State TX ZIP 75080
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TALLAHASSEE, FLORIDA

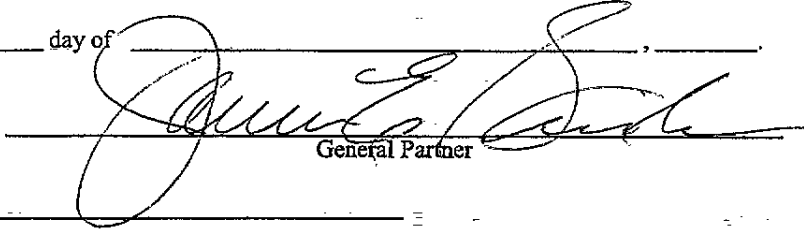
12. 100 N. Central Expressway, Suite 810

Richardson, TX 75080

(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 _____ day of _____,


General Partner

STATE OF _____

COUNTY OF _____

On this _____ day of _____,

_____ personally appeared before me,

☐ who is personally known to me

☐ whose identity I proved on the basis of _____

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED
PARTNERSHIP**

BEFORE ME the undersigned personally appeared _____,
a general partner of _____, 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 \$ 200,000.
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General Partner

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