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FOREIGN LIMITED PARTNERSHIP

FALCON PERFORMANCE FUND, L.P.

W-22889

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To: Division of Corporations **Fax:** 850-922-4003

FROM: Lauren DePass
BLUMBERG CORPORATE SERVICES, INC.

PHONE: 800-221-2972 ext. 579
FAX: 888-692-9256 or 212-431-1441

RE: **FALCON PERFORMANCE FUND, L.P.**
REF: W00000022889
FAX AUD#: H00000049489 8

Number of pages including cover sheet: 6

Message:.

Further to your request, we have corrected the attached Affidavit for the referenced filing. The complete filing is also attached, together with the electronic filing cover sheet.

Thank you.

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Katherine Harris
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September 19, 2000

BLUMBERG/EXCELSIOR

SUBJECT: FALCON PERFORMANCE FUND, L.P.
REF: W00000022889

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Your affidavit cannot say "...or more."

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) 487-6958.

Lee Rivers
Document Specialist

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

1. FALCON PERFORMANCE FUND, 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. DELAWARE (State of Formation) 4. 6-9-00 (Date of Formation)

5. MICHAEL FOGEL
(Name of Registered Agent for Service of Process)

6. 453 RIVERSIDE DR., STUART, FL 34994
(Street Address of Registered Office)

_____ (City), Florida _____ (Zip Code)

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

X Michael Fogel (Agent must sign on this line)

8. 15 East North St.
Dover, De 19901
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS M-1918 STREET ADDRESS

Fogel Management Group LLC 453 Riverside Dr.
Stuart, FL 34994

10. 453 Riverside Dr., Stuart, FL 34994
(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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12. 15 East North St., Dover, DE 19901

(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 12th day of September, 2000.

Fogel Management Group LLC
General Partner

X Michael Fogel
Michael Fogel, Manager

STATE OF New York

COUNTY OF New York

On this 12th day of September, 2000

Michael Fogel personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of

(Notary Public Signature)

Irwin M. Latner
(Notary's Printed Name)

Seal My Commission Expires: June 16, 2002

IRWIN M. LATNER
Notary Public, State of New York
No. 31-4864657
Qualified in New York County
Commission Expires June 16, 2002

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Michael Fogel, Manager of FOGEL MANAGEMENT GROUP LLC, a general partner of FALCON PERFORMANCE FUND, L.P., a (an) DELAWARE limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is $ 500,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is $ 500,000

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 12th day of September, 2000.

FOGEL MANAGEMENT GROUP LLC

X _____
General Partner
Michael Fogel, Manager

STATE OF New York

COUNTY OF New York

On this 12th day of September, 2000.

Michael Fogel, 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)

Irwin M. Latner
(Notary's Printed Name)

IRWIN M. LATNER
Notary Public, State of New York
No. 31-4864657
Qualified in New York County
Commission Expires June 15, 2002

Seal

My Commission Expires: June 16, 2002

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