



B01000000216

ACCOUNT NO. : 072100000032

REFERENCE : 192684 9964A

AUTHORIZATION :

COST LIMIT : \$ 148.75

FILED
01 JUN 20 PM 3:05
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
Patricia

ORDER DATE : June 20, 2001

ORDER TIME : 10:05 AM

ORDER NO. : 192684-025

800004432358--4

CUSTOMER NO: 9964A

CUSTOMER: Ronda M. Parris, Legal Asst
Shumaker Loop & Kendrick
Barnet Plaza, Suite 2800
101 East Kennedy Boulevard
Tampa, FL 33602

FOREIGN FILINGS

NAME: KHS&S OF CONCORD LIMITED
PARTNERSHIP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

RECEIVED
01 JUN 20 AM 10:42
STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CONTACT PERSON: Janna Wilson -- EXT# 1155

EXAMINER: _____

File 3rd

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

FILED
JUN 20 PM 5:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. KHS&S OF CONCORD 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. Nevada

(State of Formation)

4.

December 14, 1998

(Date of Formation)

5. BRUCE H. GORDON, Esq.

(Name of Registered Agent for Service of Process)

6. 101 E. Kennedy Blvd., Suite 2800

(Street Address of Registered Office)

Tampa

(City)

, Florida

33602

(Zip Code)

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

By: BH GordonBRUCE H. GORDON (Agent must sign on this line)8. 502 E. John StreetCarson City, Nevada 89706

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

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

KHS&S of Concord, LLC
Sole General Partner502 E. John Street
Carson City, NV 89706MO100000139610. 502 E. John Street, Carson City, NV 89706

(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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.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. 502 E. John Street

Carson City, NV 89706

(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 14th day of June, 2001

KHS&S of Concord, LLC

By: [Signature]

Sole General Partner

**DAVID A. STOWELL, Chairman and Sole
Managing Member**

STATE OF Florida

COUNTY OF Hillshorough

On this 14th day of June, 2001

David A. Stowell

, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

[Signature]
(Notary Public Signature)

Connie J. Rodriguez

(Notary's Printed Name)

Connie J Rodriguez

My Commission CC788549

Expires November 5, 2002

Seal

My Commission Expires: _____

01 JUN 20 PM 5:05
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared DAVID A. STOWELL, as Chairman/CEO of Keenan, Hopkins, Schmidt and Stowell Contractors, Inc. Sole Managing
a general partner of KHS&S of Concord Limited Partnership, a (an) Nevada Member of
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows: KHSS of Concord, LLC

1. The amount of capital contributions of the limited partners is \$ 100.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 0.00.

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 15 day of June, 2001

DAVID A. STOWELL as Chairman/CEO of Keenan, Hopkins, Schmidt & Stowell
Contractors, Inc. Sole Managing Member of
KHSS of Concord, LLC
General Partner

STATE OF Florida

COUNTY OF Hillsborough

On this 15th day of June, 2001

DAVID A. STOWELL, personally appeared before me,

- ☒ who is personally known to me
☐ whose identity I proved on the basis of _____

Connie J. Rodriguez
(Notary Public Signature)

Connie J. Rodriguez
(Notary's Printed Name)



Connie J. Rodriguez
My Commission CC788549
Expires November 5, 2002

FILED
01 JUN 20 PM 5:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Seal

My Commission Expires: _____