

CCRS  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE, FL 32301  
222-1173

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ACCT. #FCA-14

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CONTACT: CINDY HICKS

DATE: 7-23-01

REF. #: 0177. 17543

CORP. NAME: TRADE MART ASSOCIATES, LTD.

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION        | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT                    | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME         |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT                    | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION      | <input type="checkbox"/> UCC-1                  | <input type="checkbox"/> UCC-3                   |
| <input type="checkbox"/> OTHER: 401A000042794             |   |  |

RECEIVED  
2001 JUL 23 AM 10:10  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
OFFICE OF FILING

STATE FEES PREPAID WITH CHECK# 15879 FOR \$ 87.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

000004491180--8  
-07/23/01--01024--009  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

COST LIMIT: \$

PLEASE RETURN:


- |  |   |  |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY        | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS |   |  |

Examiner's Initials

BK

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. TRADE MART ASSOCIATES, LTD.  
(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. North Carolina 4. 9/14/81  
(State of Formation) (Date of Formation)
5. Jeffrey Schottenstein  
(Name of Registered Agent for Service of Process)
6. 1000 Brickell Avenue, Suite 910  
(Street Address of Registered Office)  
Miami, Florida 33131  
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:  
  
(Agent must sign on this line)
8. 1000 Brickell Avenue, Suite 910  
Miami, Florida 33131  
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS  
Trade Mart, Inc. 1000 Brickell Avenue, Suite 910  
Miami, Florida 33131
10. 1000 Brickell Avenue, Suite 910, Miami, Florida 33131  
(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. 1000 Brickell Avenue, Suite 910Miami, Florida 33131*(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 July, 2001By: TRADE MART, INC.Jeffrey Schottenstein, PresidentSTATE OF FloridaCOUNTY OF Miami-DadeOn this \_\_\_\_\_ day of July, 2001

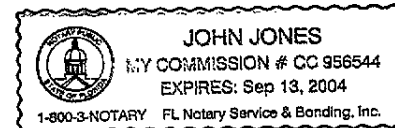
Jeffrey Schottenstein, as President of, personally appeared before me,  
Trade MART, Inc.

☒ who is personally known to me

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

[Signature]  
(Notary Public Signature)

JOHN JONES  
(Notary's Printed Name)



Seal

My Commission Expires: 9/13/04

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

Jeffrey Schottenstein, as President of  
BEFORE ME the undersigned personally appeared Trade Mart, Inc.

a general partner of Trade Mart Associates, Ltd., a (an) North Carolina  
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 3,750.00
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purpose of transacting business in Florida is \$ 0

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 July, 2001.

Trade Mart, Inc.

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

General Partner

Jeffrey Schottenstein, President

STATE OF Florida

COUNTY OF Miami-Dade

On this \_\_\_\_\_ day of July, 2001,  
Jeffrey Schottenstein, as President  
of Trade Mart, Inc.

personally appeared before me,

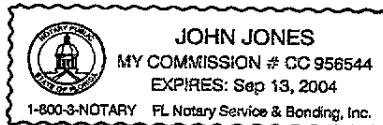
☒ who is personally known to me

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

(Notary Public Signature)

JOHN JONES

(Notary's Printed Name)



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My Commission Expires: 9/13/04

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