

CORPORATION SYSTEM

CORPORATION NAME

B01000000456

~~KMS Financial Management, Inc.~~

KMS Partners, L.P.

300004744863--1
-12/31/01--01018--025
*****52.50 *****52.50

300004744863--1
-12/31/01--01018--024
*****87.50 *****87.50

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input checked="" type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

FILED
01 DEC 31 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

12/31/01

Order#: 5019124

Ref#: _____

Amount: \$

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

01 DEC 31 AM 11:42

RECEIVED

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

601-456
12/31

Florida Department of State, Sandra B. Mortham, Secretary of State

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

1. KMS Partners, LP
(Name of limited partnership as it is in the home state)

2. KMS Partners, LP
(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. December 17, 2001
(Date of Formation)

5. C T Corporation System
(Name of Registered Agent for Service of Process)

6. c/o C T Corporation System, 1200 South Pine Island Road
(Street Address of Registered Office)

Plantation Florida 33324
(City) (Zip Code)

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

C T Corporation System

Barbara A Burke
(Agent must sign on this line)

BARBARA A. BURKE
SPECIAL ASSISTANT SECRETARY

8. 3850 NW 53rd Street, Boca Raton, Florida 33496

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

9. NAMES OF GENERAL PARTNERS STREET ADDRESS

KMS Financial Management, Inc.

3850 NW 53rd Street, Boca Raton, Florida 33496

10. 3850 NW 53rd Street, Boca Raton, Florida 33496
(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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01 DEC 31 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. 3850 NW 53rd Street, Boca Raton, Florida 33496

(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.

This 21 day of December 20/01

[Signature]
General Partner

STATE OF ~~Florida~~ TEXAS

COUNTY OF DALLAS

On this 21 day of December 20/01

KENNETH M. SHAVELSON personally appeared before me,

☐ who is personally known to me

☒ whose identity I proved on the basis of driver's license

[Signature]
(Notary Public Signature)

Michelle Ann Lancaster
(Notary Printed Name)

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01 DEC 31 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Seal

My Commission Expires: 1-18-04



AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Kenneth M. Shavelson, president of KMS Financial Management
a general partner of KMS Partners, LP, 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 \$ 0.00
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.

This 21 day of December 2001

K. Shavelson
General Partner

STATE OF TEXAS
COUNTY OF DALLAS

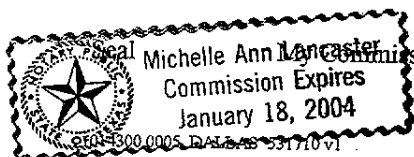
On this 21 day of December 2001

Kenneth M. Shavelson, personally appeared before me,

- ☐ who is personally known to me
☒ whose identity I proved on the basis of driver's license

Michelle Ann Lancaster
(Notary Public Signature)

Michelle Ann Lancaster
(Notary Printed Name)



Commission Expires: 1-18-04

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01 DEC 31 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA