

CT CORPORATION

# B02 000000117

CORPORATION(S) NAME

West Senior Securities Fund, L.P.

FILED  
02 APR -3 PM 4:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
02 APR -3 PM 2:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Profit                         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit                      |   |   |
| <input checked="" 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 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 <b>BK</b>    | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out                       |   |   |

Name \_\_\_\_\_  
 Availability \_\_\_\_\_  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

4/2/02

Order#: 5244402

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Ref#: \*\*\*\*105.00 \*\*\*\*105.00

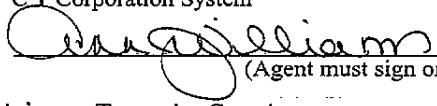
Amount: \$ \_\_\_\_\_

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

A CCH LEGAL INFORMATION SERVICES COMPANY

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

FILED  
02 APR -3 PM 14:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. West Senior Securities 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 4. 12/3/2001  
(State of Formation) (Date of Formation)
5. CT Corporation System  
(Name of Registered Agent for Service of Process)
6. c/o CT 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:  
CT Corporation System  
  
(Agent must sign on this line)  
**ANN J. WILLIAMS**  
Assistant Vice President
8. Corporation Trust Center  
1209 Orange Street, Wilmington, Delaware  
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS  
Alfred P. West 1561 Wingate Drive  
DeLand, FL 32724
10. 1561 Wingate Drive, DeLand, FL 32724  
(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. 1561 Wingate Drive, DeLand, FL 32724

(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 8TH day of JANUARY, 192002

L. P. West  
General Partner

STATE OF PA

COUNTY OF MONTGOMERY

On this 8TH day of JANUARY, 192002

Arthur P West

personally appeared before me,

☒ who is personally known to me

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

Gordon Pfeifer  
(Notary Public Signature)

Gordon Pfeifer  
(Notary's Printed Name)

Seal

My Commission Expires: \_\_\_\_\_

Notarial Seal  
Gordon Pfeifer, Notary Public  
Willistown Twp., Chester County  
My Commission Expires Jan. 3, 2004  
Member, Pennsylvania Association of Notaries

FILED  
APR -3 PM 4:15  
02  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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

BEFORE ME the undersigned personally appeared Alfred P. West  
a general partner of West Senior Securities 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 \$ 2,509,369.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 10,000.00.

*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 8th day of January, 192002.

Alfred P. West  
General Partner

STATE OF PA

COUNTY OF MONTGOMERY

On this 2TH day of JANUARY, 192002

Alfred P. West, personally appeared before me,

☒ who is personally known to me

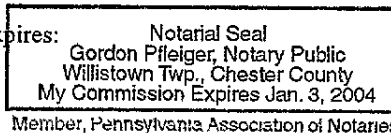
☐ whose identity I proved on the basis of \_\_\_\_\_

Gordon Pfeiffer  
(Notary Public Signature)

Gordon Pfeiffer  
(Notary's Printed Name)

Seal

My Commission Expires:



FILED  
APR -3 PM 4:15  
SECRETARY OF STATE  
HALLMARKSSEE, FLORIDA

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, personally appeared Alfred P. West, a general partner of West Senior Securities 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 \$ 2,509,368
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 10,000.00

This 8th day of January, 2002

**FURTHER AFFIANT SAYETH NOT.**

Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.

General Partner

Alfred P. West

STATE OF PA  
COUNTY OF PLUM  
DATE 01/08/02

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared Alfred P. West (General Partner, known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 8th day of January, 2002

Gordon Pfeiffer  
Notary Public

State of \_\_\_\_\_ at Large  
My Commission Expires:

Seal

