

6020000000144

Nancy Fallon-Hawke, P.C.

Requester's Name

5449 Bending Oaks Place

Address

Downers Grove, IL 60515-4456

City/State/Zip

Phone #

500005346965-1  
-04/25/02--01028--002  
\*\*\*1785.00 \*\*\*1785.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. 4/25 FOR UP MJH  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 APR 25 PM 4:52

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Examiner's Initials

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

1. Added Performance, Limited Partnership  
(Name of limited partnership as it is in the home state)

FEIN# 52-2099949

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. May 7, 1998  
(State of Formation) (Date of Formation)

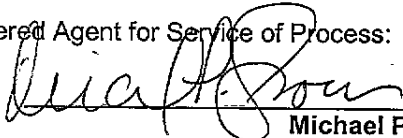
5. Michael P. Sapourn  
(Name of Registered Agent for Service of Process)

6. 100 Rialto Place, #615  
(Street Address of Registered Office)

Melbourne Florida  
(City)

32901  
(Zip Code)

7. Acceptance by Registered Agent for Service of Process:



Michael P. Sapourn  
(Agent Must Sign On This Line)

8. 100 Rialto Place, #615, Melbourne, Florida 32901  
(Address of registered office required in state of formation or, if not required, address of principal office)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

9. NAMES OF GENERAL PARTNERS	STREET ADDRESS
<u>Sapourn Financial Services, L.L.C.</u>	<u>100 Rialto Place, #615</u>
	<u>Melbourne, Florida 32901</u>

10. 100 Rialto Place, #615, Melbourne, Florida 32901  
(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.

12. 100 Rialto Place, #615, Melbourne, Florida 32901  
(Mailing Address of Limited Partnership)

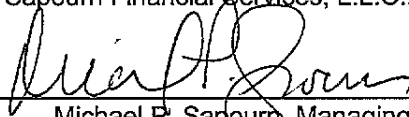
CONTINUED

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 20 day of March, 2002.

**ADDED PERFORMANCE, LIMITED PARTNERSHIP**

By: Sapourn Financial Services, L.L.C., General Partner

By: 

Michael P. Sapourn, Managing Member

STATE OF Maryland

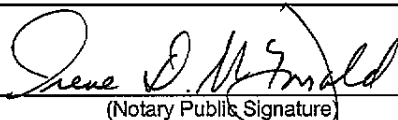
COUNTY OF Montgomery

On this 20 day of March, 2002.

Michael P. Sapourn, personally appeared before me,

☒ who is personally known to me

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

  
(Notary Public Signature)

Irene D. McDonald  
(Notary's Printed Name)

Seal

My Commission Expires: IRENE D. McDONALD  
NOTARY PUBLIC STATE OF MARYLAND  
My Commission Expires August 10, 2002

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

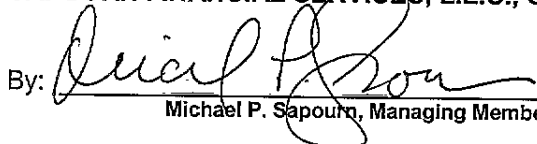
BEFORE ME the undersigned personally appeared Michael P. Sapourn  
a managing member of Sapourn Financial Services, L.L.C., the General Partner of Added Performance,  
Limited Partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 22,087,355.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 22,087,355.

*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 20 day of March, 2002.

**SAPOURN FINANCIAL SERVICES, L.L.C., General Partner**

By:   
Michael P. Sapourn, Managing Member

STATE OF Maryland

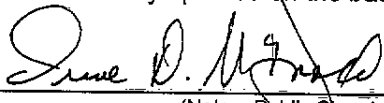
COUNTY OF Montgomery

On this 20 day of March, 2002.

Michael P. Sapourn, personally appeared before me,

☒ who is personally known to me

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

  
(Notary Public Signature)

Irene D. McDonald  
(Notary's Printed Name)

Seal

My Commission Expires: \_\_\_\_\_  
IRENE D. McDONALD  
NOTARY-PUBLIC STATE OF MARYLAND  
My Commission Expires August 10, 2002