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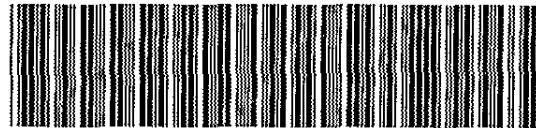
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

BOUHAN, WILLIAMS & LEVY LLP

ATTORNEYS AND COUNSELORS AT LAW

THE ARMSTRONG HOUSE

447 BULL STREET

POST OFFICE BOX 2139

SAVANNAH, GEORGIA 31402-2139

912/236-2491

April 4, 2003

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ALAN S. GAYNOR
SAMUEL A. CANN
COUNSEL

Secretary of State
Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: 17 West Ltd., LLLP

Dear Sir or Madam:

Enclose herein in regard to the above referenced entity are the following:

1. Duplicate Application by Foreign Limited Partnership for Authorization to Transact Business in Florida;
2. Duplicate Affidavit of Capital Contributions for a Foreign Limited Partnership; and
3. Our firm's check made payable to the Florida Department of State in the amount of \$87.50.

You may contact me at telephone number 912-644-5716. You may mail the acknowledgement to the undersigned at 447 Bull Street, Savannah, Georgia 31401.

Yours sincerely,



E. Pomeroy Williams
For the Firm

EPW/cl
Enclosures

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

1. 17 West Ltd., LLLP
(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. Georgia 4. November 20, 2002
(State of Formation) (Date of Formation)
5. Alice M. Dunn
(Name of Registered Agent for Service of Process)
6. 3577 Richmond Street
(Street Address of Registered Office)
- Jacksonville, Florida 32205
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:
Alice M. Dunn
(Agent must sign on this line)
8. 9 West Charlton Street, c/o J. Laurence Dunn
Savannah, Georgia 31401
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
- Richmond Trading Company, LLC M03-1227
- 447 Bull Street
- Savannah, Georgia 31401
10. 447 Bull Street, Savannah, Georgia 31401
(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.

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TALLAHASSEE FLORIDA

CONTINUED

12. 9 West Charlton Street

Savannah, Georgia 31401

(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 15th day of March, 2003

Alice M. Dunn
General Partner

STATE OF GEORGIA

COUNTY OF CHATHAM

On this 15th day of March, 2003

Alice M. Dunn, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

E. Pomeroy Williams
(Notary Public Signature)

E. Pomeroy Williams
(Notary's Printed Name)

E. POMEROY WILLIAMS
Notary Public, Chatham County, Georgia
My Commission Expires March 4, 2006

Seal

My Commission Expires: _____

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Alice M. Dunn for Richmond Trading Company,
a general partner of 17 West Ltd., LLLP, a (an) limited liability
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 495.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 495.00.

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 15th day of March, 2003.

Alice M. Dunn
General Partner

STATE OF GEORGIA

COUNTY OF CHATHAM

On this 15th day of March, 2003,

Alice M. Dunn, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

E. Pomeroy Williams
(Notary Public Signature)

E. Pomeroy Williams
(Notary's Printed Name)

E. POMEROY WILLIAMS
Notary Public, Chatham County, Georgia
My Commission Expires March 4, 2005

Seal

My Commission Expires: _____