

B03060000411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 DEC -8 PM 12:37
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December 8, 2003

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Academy Income Properties I, L.P.

Filing Evidence

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

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NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

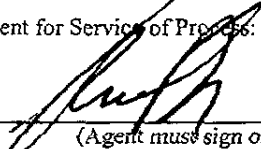
OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

X LP

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

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TREASURER, FLORIDA

1. Academy Income Properties I, L.P.
(Name of limited partnership as it is in the home state)
2. AIP I, L.P.
(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. New York
(State of Formation)
4. 11/6/03
(Date of Formation)
5. Ferdinand Reinleib
(Name of Registered Agent for Service of Process)
6. 1440 Arrowhead Trail
(Street Address of Registered Office)
- Enterprise, Florida 32725
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:

(Agent must sign on this line)
8. 13 S. Fitzhugh Street
Rochester, New York 14614
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
J. Peter Willard 13 S. Fitzhugh Street
Rochester, New York 14614
10. 13 S. Fitzhugh Street, Rochester, New York 14614
(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. 13 S. Fitzhugh Street

Rochester, New York 14614

(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 3rd day of December, 2003.

J. Peter Willard
General Partner

STATE OF NEW YORK

COUNTY OF MONROE

On this 3rd day of Dec., 2003.

J. Peter Willard

, personally appeared before me,

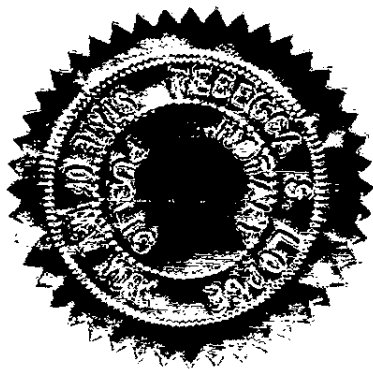
☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Rebecca S. Lodge
(Notary Public Signature)

Rebecca S. Lodge
(Notary's Printed Name)

My Commission Expires: 10-15-06



Rebecca S. Lodge
Notary Public, State of New York
Qualified in Ontario County
Commission Expires October 15, 2006

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared J. Peter Willard
a general partner of Academy Income Properties I, L.P., a (an) New York
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 319,500.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 319,500.

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 3rd day of December, 2003

J. Peter Willard
General Partner

STATE OF NEW YORK

COUNTY OF MONROE

On this 3rd day of December, 2003

J. Peter Willard, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Rebecca S. Lodge
(Notary Public Signature)
Rebecca S. Lodge

(Notary's Printed Name)

Seal

My Commission Expires: 10-15-06



Rebecca S. Lodge
Notary Public, State of New York
Qualified in Ontario County
Commission Expires October 15, 2006