D0400000011

00789-00717-40671

| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
| 2 CC | | |

Office Use Only

MOH-4964



900025750349

HLM

12/25/03 -- 0.039 -- 035 **, 92 50

04 JCH 25 PH 1: 43



225 Water Street, Suite 2020 Jacksonville, Florida 32202 P 904.301.1269 F 904.301.1279 www.intrepidlaw.com

December 22, 2003

VIA OVERNIGHT DELIVERY

Department of State Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Dear Ladies and Gentlemen,

Please find enclosed the following documents:

- 1. Application By Foreign Limited Partnership for Authorization to Transact Business in Florida (the "Partnership Registration") (2 copies);
- 2. Texas Good Standing Certificate for FesteCapital Development, Ltd.; and
- 3. a check payable to the Florida Department of State for filing fees and 2 certified copy(ies).

The name and address of the contact person and the person to whom all acknowledgments and should be addressed is:

Tammy D. Butler Driver & McAfee, P.L. 225 Water Street, Suite 2020 Jacksonville, Florida 32202 (904) 301-1265

If you have any questions, please give me a call. Thank you.

Sincerely,

January D. Butler
Tammy D. Butler



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 6, 2004

TAMMY D. BUTLER
DRIVER & MCAFEE, P.L.
225 WATER STREET, SUITE 2020
JACKSONVILLE, FL 32202

SUBJECT: FESTECAPITAL DEVELOPMENT, LTD.

Ref. Number: W0400000488

We have received your document for FESTECAPITAL DEVELOPMENT, LTD. and your check(s) totaling \$192.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 104A00000610

Michelle Hodges Document Specialist

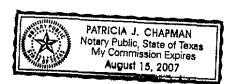
APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| FesteCapital Development, Ltd. | | |
|--|--|------------------|
| (Name of limited pa | artnership as it is in the home state) | |
| If name is unavailable, name under which the limit must contain the | ted partnership proposes to register or transact busics word "LIMITED" or "LTD.") | ness in Florida; |
| Texas | 4. August 8, 2003 | |
| (State of Formation) | (Date of Formation) | |
| Driver & McAfee, P.L. | | |
| (Name of Registere | ed Agent for Service of Process) | |
| 225 Water Street, Suite 2020 | | |
| (Street Add | dress of Registered Office) | |
| Jacksonville | Elorida 32202 | |
| | , Florida (Zip Code) | |
| (City) . Acceptance by the Registered Agent for Service of Driver & McAfee, P.L. By: M. W. | of Process: | t |
| Acceptance by the Registered Agent for Service of Driver & McAfee, P.L. By: M M (Agent) | of Process: Matthew S. McAfee, Executive Vice President must sign on this line) | t |
| Acceptance by the Registered Agent for Service of Driver & McAfee, P.L. By: M.W. (Agent) | of Process: Matthew S. McAfee, Executive Vice President must sign on this line) | t |
| Acceptance by the Registered Agent for Service of Driver & McAfee, P.L. By: M'W (Agent) 7018 A. C. Skinner Parkway, Suite 2 | of Process: Matthew S. McAfee, Executive Vice President must sign on this line) | |
| Acceptance by the Registered Agent for Service of Driver & McAfee, P.L. By: McAfee, P.L. (Agent) Agent Agent Agent Agent Agent Agent Agent Address of registered office required in state | of Process: Matthew S. McAfee, Executive Vice President Must sign on this line) | al office.) |
| Acceptance by the Registered Agent for Service of Driver & McAfee, P.L. By: M W (Agent) (Agent) 7018 A. C. Skinner Parkway, Suite 2 | Matthew S. McAfee, Executive Vice President thust sign on this line) of formation or, if not required, address of princip | al office.) |
| Acceptance by the Registered Agent for Service of Driver & McAfee, P.L. By: McAfee, P.L. (Agent) (Agent) (Agent) (Agent) (Agent) (Address of registered office required in state NAMES OF GENERAL PARTNERS | Matthew S. McAfee, Executive Vice President flust sign on this line) of formation or, if not required, address of princip STREET ADDRESS 8226 Bee Caves Road | |

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.

(Office where Names, Addresses and Contributions of Limited Partners are kept.)

| _{12.} 8226 Be | ee Caves Road | | | |
|------------------------|---|--|--|--|
| Austin, 1 | Гехаs 78746 | | | |
| | (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 | day of | | | |
| | FesteCapital Management, LLC | | | |
| | By: Gregory L. Feste, President General Partner | | | |
| STATE OF _ | Texas | | | |
| COUNTY OF_ | Travis | | | |
| On this | 19th day of Alcomber, 2003. Gregory J. Flate, personally appeared before me, | | | |
| | Fragry S. Festo, personally appeared before me, | | | |
| / | nally known to me | | | |
| whose identi | ity I proved on the basis of | | | |
| | Jatricea Clapman (Notary Fublic Signature) | | | |
| | PATRICIA J. CHAPMAN (Notary's Printed Name) My Commission Expires: August 15, 2007 | | | |
| Seal | My Commission Expires: (1) | | | |



AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

| BEFORE ME the undersigned personally appeared | regory L. Feste, President of FesteCapital Management, LLC |
|--|--|
| a general partner of FesteCapital Development, Lt | td. , a (po) Texas |
| limited partnership, hereinafter referred to as the "Partn | |
| 1. The amount of capital contributions of the limited pa | partners is \$ |
| 2. The anticipated amount of the capital contributions | of the limited partners that are allocated for the purposes of |
| transacting business in Florida is \$ 40.00 . | |
| | |
| Under the penalties of perjury I, being duly sworn, dec | clare that I have read the foregoing and know the contents thereof and |
| that the facts stated herein are true and correct, | |
| Signed this day of | |
| FesteCapital Manageme | ent, LLC |
| By: Crox C7 | Gregory L. Feste, President General Partner |
| | General Partner |
| STATE OF Texas | _ |
| COUNTY OF Travis | |
| On this 1944 day of A | Occomper, 2003, |
| Gregory G. Fes | te), personally appeared before me, |
| | |
| who is personally known to me | |
| whose identity I proved on the basis of | |
| | |
| Batricia Chagma (Notary Public Signature) | w) |
| PATRICIA J. CHAPMAT (Notary's Printed Name) | N |
| 4 | ust 15, 2007 |

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



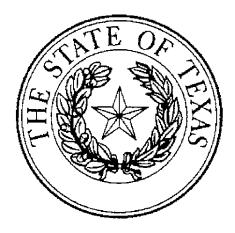
Geoffrey S. Connor Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Limited Partnership for FesteCapital Development, Ltd. (filing number: 800233716), a Domestic Limited Partnership (LP), was filed in this office on August 08, 2003.

It is further certified that the entity status in Texas is active.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 25, 2003.



Geoffrey S. Connor Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/ PHONE(512) 463-5555 FAX(512) 463-5709 Prepared by: SOS-WEB