

BD5000000459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

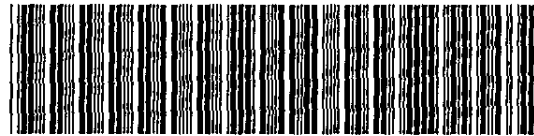
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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N. Culligan OCT 24 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 7604 Kempwood, L.P.
(Name of Foreign Limited Partnership)

Dear Sir or Madam:

The enclosed application, affidavit and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEAN PREVOLOS
(Name of Person)

Commercial Management of Naples
(Firm/Company)

P.O. Box 8537
(Address)

NAPLES, FL 34101
(City/State and Zip Code)

For further information concerning this matter, please call:

Dean Prevolos at 239 435-9797
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

1. 7604 Kempwood, 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.")

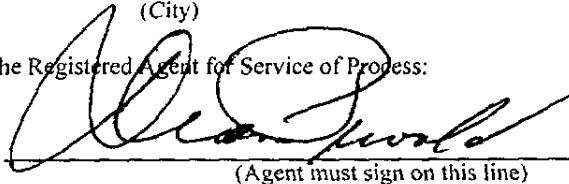
3. TEXAS 4. Sept. 14, 2005
(State of Formation) (Date of Formation)

5. DEAN PREVOLOS / C.M.I.
(Name of Registered Agent for Service of Process)

6. 1250 TAMMIAMI TRAIL N., #304
(Street Address of Registered Office)

NAPLES, Florida 34102
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:


(Agent must sign on this line)

8. 1250 TAMMIAMI TRAIL N., #304
NAPLES, FL 34102
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

DONATO PISANI 1318 VIA PORTOFINO ROAD
NAPLES, FLORIDA 34108

10. CMI 1250 TAMMIAMI TRAIL N., #304, NAPLES, FL 34102
(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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12. 7604 Kempwood L.P. c/o C.M.I.

P.O. Box 8537, Naples, FL. 34101

(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 19th day of October

[Signature]
General Partner

STATE OF Florida

COUNTY OF Collier

On this 19th day of October, 2005

Domenica Pisoni, personally appeared before me,

☒ who is personally known to me

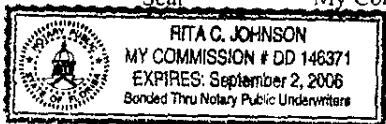
☐ whose identity I proved on the basis of _____

[Signature]
(Notary Public Signature)

RITA C. JOHNSON
(Notary's Printed Name)

Seal

My Commission Expires: September 2, 2006



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AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Donato Pisani,
a general partner of 7604 Kempwood L.P., a (an) TEXAS
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 100.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 900.00

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 19th day of OCTOBER, 2005

Donato Pisani
General Partner

STATE OF Florida
COUNTY OF Collier

On this 19th day of October, 2005.

Donato Pisani, personally appeared before me.

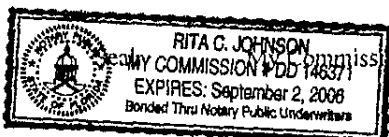
☒ who is personally known to me

☐ whose identity I proved on the basis of _____

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Rita C. Johnson
(Notary Public Signature)

RITA C. JOHNSON
(Notary's Printed Name)



My Commission Expires: September 2, 2006

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



Roger Williams
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 7604 Kempwood, L.P (filing number: 800544799), a Domestic Limited Partnership (LP), was filed in this office on September 14, 2005.

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

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 October 11, 2005.



A handwritten signature in black ink that reads "Roger Williams".

Roger Williams
Secretary of State