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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

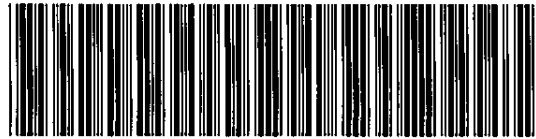
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TALLAHASSEE, FLORIDA

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Black Buster Investors Limited Partnership

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

File 2nd

SPECIAL INSTRUCTIONS:

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

FILED
06 DEC 26 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. **BLOCKBUSTER INVESTORS LIMITED PARTNERSHIP**

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. **GEORGIA**

(State or Country of Formation)

3. **AUGUST 31, 1992**

(Date of Formation)

4. **MATTHEW R. O'KANE**

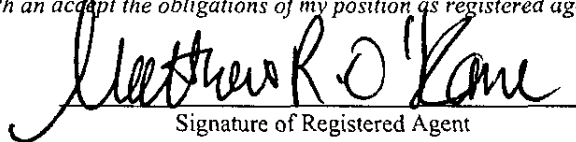
(Name of Registered Agent for Service of Process)

5. **215 NORTH EOLA DRIVE**

(Florida street address for Registered Agent)

ORLANDO, FLORIDA 32801

6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to
comply with the provisions of all statutes relative to the proper and complete performance of my duties,
and I am familiar with and accept the obligations of my position as registered agent.


Signature of Registered Agent

7. **4045 ORCHARD ROAD, BLDG. 400**

(Principal office address)

SMYRNA, GEORGIA 30080

8. If limited partnership is a limited liability limited partnership, check box ☐

9. 29 EAST NINE MILE ROAD

(Mailing address)

PENSACOLA, FLORIDA 32534

10. Name, principal office address, and mailing address of each general partner:

MCWHIRTER PROPERTIES, INC.

(Name)

F95000001128

4045 ORCHARD ROAD

(Street Address)

BLDG. 400

SMYRNA, GA 30080

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

11. Effective date, if other than the date of filing: _____.

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 18th day of DECEMBER, 20 06.

Signature of a general partner: **MCWHIRTER PROPERTIES, INC., a Georgia corporation**

BY: 
BARRY E. MCWHIRTER, PRESIDENT

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Control No. K217049

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

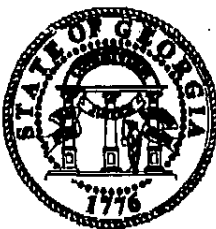
BLOCKBUSTER INVESTORS LIMITED PARTNERSHIP

Domestic Limited Partnership

was formed or was authorized to transact business on 08/31/1992 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 19th day of December, 2006

Cathy Cox
Secretary of State

Certification Number: 446916-1 Reference:
Verify this certificate online at <http://corp.sos.state.ga.us/corp/soskb/verify.asp>