

Document Number Only

B95000000140

C T CORPORATION SYSTEM

Requestor's Name

1311 Executive Center Drive, Ste. 200

Address

Tallahassee, FL 32301 (904) 656-8298

City State Zip Phone

CORPORATION(S) NAME

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 21 PM 1:54

hjt 13/c 4/21/95
C. TAX _____
FILING _____ 52.50
R. AGENT FEE _____ 35.00
TOTAL _____ 87.50
I. BANK _____
BALANCE DUE _____

Team Alliance Technology Partners, L.P., Limited

☐ Profit
☐ NonProfit

☐ Amendment

☐ Merger

☒ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☒ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Fictitious Name

☐ Certified Copy

☐ Photo Copies

☐ CUS / G/S

☐ Call When Ready

☐ Call if Problem

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800001468358
-04/28/95--01062--001
*****87.50 *****87.50

Buck,
The original affidavit will
follow up Monday.

Florida Department of State, Jim Smith, Secretary of State

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

1. TeamAlliance Technology Partners, L.P., Limited
(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. New York 4. June 17, 1994
(State of Formation) (Date of Formation)
5. CT CORPORATION SYSTEM
(Name of Registered Agent for Service of Process)
6. c/o C T Corporation System, 1200 South Pine Island Road
(Street Address of Registered Office)
- Plantation , Florida 33324
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process.
- CT CORPORATION SYSTEM
Jonnie Bryan
(Officer must sign on this line)
JONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
(Type Name and Title of Officer)
8. The Corporation Trust Company, 1209 Orange Street, Wilmington, DE 19801
(Address of Registered Office required in State of Formation or, if not required, Address of Principal Office.)
- | 9. NAME OF GENERAL PARTNERS | SPECIFIC ADDRESS |
|----------------------------------------|------------------------------------------------------------|
| TeamAlliance Technology Partners, Inc. | One World Trade Center
Suite 7967
New York, NY 10048 |
10. One World Trade Center, Suite 7967, New York, NY 10048
(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 cancelled or withdrawn.
12. One World Trade Center, Suite 7967, New York, NY 10048
(Mailing Address of Limited Partnership)

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This 17th day of March, 19 95.

[Signature]
General Partner
TeamAlliance Technology Partners, Inc.
by: Richard Harmon, President

STATE OF New York

COUNTY OF New York

THE FOREGOING instrument was acknowledged and sworn to before me this 17th day of March, 19 95, by TeamAlliance Technology (Name of General Partner) of Partners, Inc.

TeamAlliance Technology Partners, L.p.
(Name of Limited Partnership), A New York (State or Country) Limited Partnership, on behalf of the Limited Partnership.

[Signature]
Notary Public

State of _____ at Large

(SEAL)

My Commission Expires:

ELAINE BRYANT
Notary Public, State of New York
No. 31-4647672
Qualified in New York County
Commission Expires Feb. 28, 1996

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Mordecai Levine, Vice President of TeamAlliance Technology Partners, Inc. the general partner of TeamAlliance Technology Partners, 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 \$ 15,000.00.

2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 1000.00.

This _____ day of April, 1995.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.

TeamAlliance Technology Partners, Inc.,
General Partner

by: Mordecai Levine
Mordecai Levine, Vice President

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DIVISION OF CORPORATIONS
95 APR 21 PM 1:54

STATE OF New York
COUNTY OF New York
DATE April 14, 1995

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared Mordecai Levine, VP of TeamAlliance Technology Partners, Inc. (General Partner, known to me and know by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 14th day of April, 1995.

Elaine Bryant
Notary Public

Seal

State of _____ at Large
My Commission Expires: _____

ELAINE BRYANT
Notary Public, State of New York
No. 31-4647672
Qualified in New York County
Commission Expires Feb. 28, 1996

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

1995 NOV 21 PM 12: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #
B95000000140

TEAMALLIANCE TECHNOLOGY PARTNERS, L.P., LIMITED

Mailing Address

ONE WORLD TRADE CENTER, SUITE 7067
NEW YORK NY 10048

Principal Office Address

THE CORPORATION TRUST COMPANY
1209 ORANGE STREET
WILMINGTON DE 19801

2. New Mailing Address, if Applicable

Suite, Apt #, etc

600001646746

City, State & Zip

-11/28/95--01034--011

******191.25 ****191.25**

2a. New Principal Office Address, if Applicable

Suite, Apt #, etc

City, State & Zip

3. Date Formed or Registered to Do Business in
FLORIDA **04/21/1995**

3a. Date of Last Report

N/A

4. State or Country of Formation

NY

5a. Capital Contributions as Shown
on Record
\$1,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

0

6. FEI Number

13-3774205

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

**\$0.75 Additional Fee required
for a Certificate of Status**

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2.) Supplemental Fee \$138.75 (pursuant to section 607.193, F.S.)

THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)

Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt #, etc

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

TEAMALLIANCE TECHNOLOGY PART

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers.)

ONE WORLD TRADE CENTE

11b. City, State & Zip Code

NEW YORK NY 10048

11c. Registration/
Document Number

F95000001950

**DR - \$52.50
SF - \$138.75**

11-22-95

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

MORDY L

DATE

11/17/95

Typed or Printed Name of General Partner Signing Form

MORDY LEVINE

Telephone Number

914 4513300

Document Number Only

B95000000140

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

FILED
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97 JUN 27 PM 1:09

TeamAlliance Technology Partners, LP.

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*****\$2.50 *****\$2.50

☐ Profit

☐ NonProfit

☐ Limited Liability Co.

☐ Foreign

☐ Amendment

☒ Dissolution/Withdrawal

☐ Merger

☐ Mark

☐ Limited Partnership

☐ Reinstatement

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**CERTIFICATE OF CANCELLATION OF REGISTRATION OF
FOREIGN LIMITED PARTNERSHIP**

Pursuant to the provisions of Section 620.174 of the Florida Uniform Limited Partnership Act, the following Certificate of Cancellation of Foreign Limited Partnership is submitted for filing.

ARTICLE 1. The name of the limited partnership is _____

TeamAlliance Technology Partners, L.P.

ARTICLE 2. If different than above, the name of the limited partnership under which it is

Certificate of Authority was issued in Florida is TeamAlliance Technology

Partners, L.P., Limited .

ARTICLE 3. The limited partnership's Certificate of Authority to conduct business in Florida was issued on April 21, 1995

ARTICLE 4. The effective date of cancellation, if different than the date of the filing of this Certificate with the Secretary of State, is _____

ARTICLE 5. The authority of the Secretary of State to accept service of process for the limited partnership with respect to causes of action arising out of the transaction of business in the State of Florida survives the filing of this Certificate and remains in effect.

ARTICLE 6. The address in the jurisdiction of organization of the limited partnership to which the Secretary of State can forward service of process is 590 Fifth Avenue, 18th Floor,
New York, NY 10036.

4/27
(Date)

, 1997

TeamAlliance Technology Partners, Inc.,
general partner

[Signature]
(Signature of general partner)

by: Mordecai Levine, Vice President

(type/print name of signator above)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JUN 27 PM 3 09

State of New York

County of New York

Subscribed and sworn or affirmed before me this 27th day
of April, 19 97, by Mordecai Levine,
Vice Pres. of Teal Alliance Technology Partners, Inc., a general partner
of Teal Alliance Technology Partners, L.P., a foreign limited partnership.

Elaine Bryant
Notary Public

(NOTARIAL SEAL)

ELAINE BRYANT
Notary Public, State of New York
No. 31-4647672
Qualified in New York County
Commission Expires Feb. 28, 1998

My Commission expires: _____

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