

B95000000201

CARLTON E. ELDON
(Requester's Name)
215 S. MANROE STREET
(Address)

(City, State, Zip) (Phone #)

OFFICE USE ONLY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUN -2 AM 11:05

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. TAMPA BAY ARENA, L.P. (Corporation Name) (Document #) _____
2. _____ (Corporation Name) (Document #) _____
3. _____ (Corporation Name) (Document #) _____
4. _____ (Corporation Name) (Document #) _____

500001508356
-06/08/95--01044--023
***1846.25 ***1846.25

- ☒ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☒ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A. Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

~~DEPT~~ CUS 8.75
FILING 1750.00
R. AGENT FEE 35.00
C. COPY 52.50
TOTAL 1846.25
N. BANK
BALANCE DUE
FEES

6/2/95

Examiner's Initials BK

Florida Department of State, Jan Smith, Secretary of State

APPLICATION BY FOREIGN LIMITED PARTNERSHIP
FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDAFILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN -2 AM 11:051. Tampa Bay Arena, L.P.

(Name of limited partnership as it is in the home state)

2. Tampa Bay Arena, Ltd.

(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. Delaware

(State of Formation)

4. May 18, 1995

(Date of Formation)

5. Carlton, Fields, Ward, Emmanuel, Smith & Cutler, P.A., Attn:

(Name of Registered Agent for Service of Process)

Paul C.
Davis6. One Harbour Place, Suite 500

(Street Address of Registered Office)

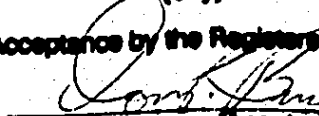
Tampa

(City)

, Florida33602

(Zip Code)

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



(Agent must sign on this line)

8. The Corporation Trust Center, 1209 Orange Street, Wilmington, Delaware

(Address of Registered Office required in State of Formation or, if not required, Address of Principal Office.)

19801

9. NAME OF GENERAL PARTNERS

SPECIFIC ADDRESS

Lightning Arena, Inc.

501 E. Kennedy Boulevard
Suite 1900
Tampa, Florida 33602

8940000040025

10. 501 E. Kennedy Boulevard, Suite 1900, Tampa, Florida 33602

(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. 501 E. Kennedy Boulevard, Suite 1900, Tampa, Florida 33602

(Mailing Address of Limited Partnership)

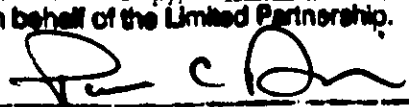
This 1st day of June, 1995.
By: LIGHTNING ARENA, INC. General Partner
By: Saburo Oto, President

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

THE FOREGOING instrument was acknowledged and sworn to before me this 1st day
of June, 1995, by Saburo Oto, President (Name of General Partner) of
of Lightning Arena, Inc.

Tampa Bay Arena, L.P.
(Name of Limited Partnership), A Delaware (State or Country) Limited
Partnership, on behalf of the Limited Partnership.


Notary Public

State of _____ at Large

(SEAL)

My Commission Expires: _____



FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 JUN -2 AM 11:05

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Saburo Oto, President of Lightning Arena, Inc., a general partner of Tampa Bay Arena, L.P., a (an) Delaware limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 990,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purpose of transacting business in Florida is \$ 990,000.

This 1ST day of June, 1995

FURTHER AFFIANT SAYETH NOT.

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

LIGHTNING ARENA, INC.

General Partner

By: Saburo Oto

Saburo Oto
Its: President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 22 AM 11:05

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH
DATE June 1, 1995

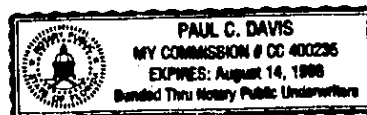
BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared Saburo Oto, President of Lightning Arena, Inc. (General Partner, known to me and known by me to be the person who executed 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 1ST day of June, 1995.

Paul C. Davis
Notary Public

Seal

State of _____ at Large
My Commission Expires: _____



B95000000201

FILED

96 APR 26 PM 12:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DO NOT WRITE IN THIS SPACE

DOCUMENT #

B95000000201

1. Name of Limited Partnership

TAMPA BAY ARENA, LTD.

2. Mailing Address

501 E. Kennedy Blvd.

3. Principal Office Address

501 E. Kennedy Blvd.

4. Date Formed or Registered To Do Business in Florida

06/02/1995

Suite, Apt. # etc.

Suite 1900

Suite, Apt. # etc.

Suite 1900

5. FEI Number

59-3316446

Applied For

Not Applicable

City & State

Tampa FL

City & State

Tampa FL

Zip

33602

Country

USA

Zip

33602

Country

USA

6. CERTIFICATE OF STATUS DESIRED ☐

7. State or Country of Formation FL

8a. Capital Contributions as Shown on Record

\$990,000.00

8b. Amount of Capital Contributions in FLORIDA to date

FEES: 1.)

Filing Fee(s) Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office

2.) Supplemental Fee(s) \$138.75 for each year due this office, beginning with 1992 calendar year

3.) Penalty Fee(s) \$500 penalty fee for each year report form is delinquent

Note

If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee

9. Name and Address of Current Registered Agent

10. If changed, new registered agent/office

CARLTON FIELDS WARD, ET AL
ATTN: PAUL DAVIS
ONE HARBOUR PLACE, SUITE 500
TAMPA FL 33602

Name

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

Suite, Apt. # etc.

City

680001015606

-05/03/96--01101--011

***1076.25 FL ***1076.25

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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Names of General Partner(s)

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

City, State and Zip Code

11a. Registration Document Number

LIGHTNING ARENA, INC.

501 E. KENNEDY BLVD.

TAMPA FL 33602

P94000040025

REINSTATEMENT

96

CR 4-29

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

Frank

DATE

4/23/96

Typed or Printed Name of General Partner Signing Form

LIGHTNING ARENA, INC.

Telephone Number

(813) 276-7371

CR2001 (4/95)