Document Number Only

B95000000348

C T CORPORATION SYSTEM
Requestor's Name
660 East Jefferson Street
Address
Tallahassee, Florida 32301
City State Zip Phone
904-222-1092

CORPORATION(S) NAME

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT -2 PM 2:24

300001607683
-10/11/95--01120--024
*****87.50 *****87.50

Gincom Lessee, L.P., Limited Partnership

( ) Profit
( ) NonProfit
( ) Limited Liability Company
( ) Foreign
(X) Limited Partnership
( ) Reinstatement
( ) Certified Copy
( ) Call When Ready
(●) Walk In
( ) Mail Out

( ) Amendment
( ) Dissolution/Withdrawal
( ) Annual Report
( ) Reservation
( ) Photo Copies
( ) Call If Problem
( ) Will Wait

( ) Merger
( ) Mark
( ) Other
( ) Change of R.A.
( ) Fictitious Name
( ) CUS/ C/S
( ) After 4:30
(●) Pick Up

Name Availability MTC 10/2/95
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

10/2/95
3 00

PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

C. TAX
FILING 52.50
R. AGENT FEE 35.00
C. COPY
TOTAL 87.50
N. BANK
BALANCE DUE
REFUND

CR2E031 (1-89)

Florida Department of State, Jim Smith, Secretary of State

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

1. Gencom Lessee, L.P., Limited Partnership
(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. Delaware (State of Formation) 4. June 7, 1995 (Date of Formation)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT -2 PM 2:24

5. C T 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 (City), Florida 33324 (Zip Code)

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

C T CORPORATION SYSTEM

(Officer must sign on this line)

DANIEL P. MCMAHON - ASST SECY
(Type Name and Title of Officer)

8. 1209 Orange Street, Wilmington, Delaware 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
Gencom Lessee Company, LLC	One Westchase Center 10777 Westheimer, Suite 1000 Houston, Texas 77042

M95000002876

10. One Westchase Center, 10777 Westheimer, Suite 1000, Houston, Texas 77042
(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 Westchase Center, 10777 Westheimer, Suite 1000, Houston, Texas 77042
(Mailing Address of Limited Partnership)

(FLA. LP 2819 – 2/1/92)

SIGNATURE PAGE
TO
APPLICATION BY FOREIGN LIMITED PARTNERSHIP
FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(GENCOM LESSEE, L.P.)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT -2 PM 2:24

This 27, day of September, 1995.

General Partner:

GENCOM LESSEE COMPANY, LLC

By: _____
Karim Alibhai,
Member and Sole Manager

STATE OF TEXAS

COUNTY OF DALLAS

THE FOREGOING instrument was acknowledged and sworn to before me this 27th, day of September, 1995, by Karim Alibhai, Member and Sole Manager of Gencom Lessee Company, LLC, a Texas limited liability company, in its capacity as General Partner of GENCOM LESSEE, L.P., a Delaware Limited Partnership, on behalf of such limited liability company on behalf of the Limited Partnership.

LINDA L. SLAVIK
MY COMMISSION EXPIRES
March 31, 1997

_____
NOTARY PUBLIC, STATE OF TEXAS

My commission expires:

_____

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Karim Alibhai, member and sole manager of Gencom Lessee Company, LLC, general partner of Gencom Lessee, L.P., a Delaware limited partnership (hereinafter referred to as the "Partnership"), who certifies as follows:

1. The amount of capital contributions of the limited partners is $ 990.00.

2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is $ 99.00.

This 29th day of September, 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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 OCT -2 PM 2:24

General Partner:

GENCOM LESSEE COMPANY, LLC

By: _____
Karim Alibhai,
Member and Sole Manager

STATE OF TEXAS

COUNTY OF DALLAS

THE FOREGOING instrument was acknowledged and sworn to before me this 29th day of September, 1995, by Karim Alibhai, Member and Sole Manager of Gencom Lessee Company, LLC, a Texas limited liability company, in its capacity as General Partner of GENCOM LESSEE, L.P., a Delaware Limited Partnership, on behalf of such limited liability company on behalf of the Limited Partnership.

LINDA L. SLAVIK
MY COMMISSION EXPIRES
March 31, 1997

_____
NOTARY PUBLIC, STATE OF TEXAS
My commission expires:

_____

FILE ON OR BEFORE APRIL 5, 1996 TO AVOID REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT **1996**

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

FILED
96 MAR 28 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

GENCOM LESSEE, L.P., LIMITED PARTNERSHIP

1a. DOCUMENT # **B95000000348**

Mailing Address
ONE WESTCHASE CENTER
10777 WESTHEIMER, SUITE 1000
HOUSTON TX 77042

Principal Office Address
1209 ORANGE STREET
WILMINGTON DE 19801

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

2. New Mailing Address, If Applicable
Suite, Apt. #, etc.
City, State & Zip

900001766879
-04/02/96--01100--004
****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: **10/02/1995**

3a. Date of Last Report

4. State or Country of Formation: **DE**

5a. Capital Contributions as Shown on Record: **$99.00**

5b. Amount of Capital Contributions in FLORIDA to date

6. FEI Number

Applied For ✓
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED
$8.75 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

OK 3-28

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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do Not Use Post Office Box Number)	11b. City, State & Zip Code	11c. Registration/ Document Number
GENCOM LESSEE COMPANY, LLC	10777 WESTHEIMER, SUI	HOUSTON TX 77042	M95000000286

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)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information submitted 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.

By: GenCom Lessee Company, LLC, a Texas limited liability company

SIGNATURE _____ DATE _____

Typed or Printed Name of General Partner Signing Form: Karm Akbrat, Sole Manager Telephone Number: 713-952-7800

CR2E003 (11/95)