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

| Making Address  800 Laurel Oak Dr. 8205 Liming Stee. 200 Fort Ways Naples, FL 33963  If above address are incorrect in any way one through the incorrect information and 11/15/95  3. Date 1 provide or Registered to Do Bosiness in FLORIDA to date of Last Report N/A  11/15/95  5. Copital Computations as Shown or Record To Steel Computed at a rate of \$7 per \$1.000 on amount entered in 50 Record To Supplemental Fee \$138.75 (pursuant to section 607.193. F.S.)  THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \cdot \$133.75) AND NON Note If the amount entered in 50 is greater than amount entered in 5a. a supplemental Fee \$138.75 (pursuant to section 607.193. F.S.)  Note If the amount entered in 50 is greater than amount entered in 5a. a supplemental Fee \$138.75 (pursuant to section 607.193. F.S.)  MAKE CHECK PAYABLE TO FLORIDA DEPT OF STATE  9. Name and Address of Current Registered Agent  Michael Oh 800 Laurel Oak Dr., Ste. 200  Naples, Florida 33963  10a. Pursuant to the provisions of sections 620.1051 and 620.192 Frontia Statutes to the purpose of changing its registered office or registered agent or both in a good I am tamihar with and accept the obligations of section 620.192 Frontia Stignature (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORE  | Road  ie, IN  uniter correct  4. Sturi         | 46818 I address in Bloc<br>o or Country of F-<br>nd Lana El Number | omition   | 2. Nima M. Surte Apt a City State & 28. New F Surt / Apt a City State & 2                 | Address  | PNOT WA<br>H Applic<br>12/18<br>中東東東<br>e Address       | ACHIEN THIS ADM  3795  31-25 H Applicat | \$PACE<br>1.15.16<br>-01022<br>5 ***              | 372<br>2-007<br>**191.29           |
|---|--|--|---|---|--|---|---|---|------------------------------------|
| 800 Laurel Oak Dr. 8205 Limit Ste. 200 Fort Ways Naples, FL 33963  If above additionable are incorrect in any way one through the accorded addition and 1.1/15/95  3. Oate Furned or Registered to Du Business in 1.1/15/95  N/A  11/15/95  N/A  5. Copidal Contributions as Shown or Record Contributions as Shown or Record Duple of Last Report FLORIDA to date 500,000  8. FEES; 1) Filing Fee Computed at a rate of 37 per \$1.000 on amount entered in 2.1 Supplemental Fee \$138.75 (pursuant to section 607.193, FS.)  THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \cdot \$132.75) AND NO MAKE CHECK PAYABLE TO FLORIDA DEPT OF STATE  9. Name and Address of Current Registered Agent  Michael Oh  800 Laurel Oak Dr., Ste. 200  Naples, Florida 33963  10a. Pursuant to the provisions of sections 620.1051 and 620.192 Fiorida Statutes to the purpose of changing its registered office or registered agent or both in agent 1 am tambar with and accept the obligations of section 620.192 Fiorida Statutes (agent 2 m tambar with and accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORE  | Road  ie, IN  uniter correct  4. Sturi         | 46818 I address in Bloc o or Country of F. nd1.ana El Number       | omition   | Surfe Apt a  City State &  Za. New F  Surfy Apt a  City State & 2  X A  A  of \$52 50 and | Address  | PADDIC<br>12/18<br>************************************ | ADIA<br>3/95-<br>91-25<br># Applicat    | 1-5:5<br>-0:10:22<br>-***                         | 2007<br>**1 <del>91-2</del> !      |
| 800 Laurel Oak Dr. 8205 Limit Ste. 200 Fort Ways Naples, FL 33963  If above addinate are incorrect in any way the through the incorrect information and 3. Date Furned or Registered to Du Business in FLORIDA 11/15/95  Sa. Capital Committutions as Shown of Record Date of Last Report FLORIDA to date 500,000  8. FEES: 1) Filing Fee Computed at a rate of \$7 per \$1.00 on amount entered in \$138.75 (pursuant to section 607.193, FS.)  THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \cdot \$132.75) AND NO  | Road  ie, IN  uniter correct  4. Sturi         | 46818 I address in Bloc o or Country of F. nd1.ana El Number       | omition   | Surfe Apt a  City State &  Za. New F  Surfy Apt a  City State & 2  X A  A  of \$52 50 and | otc Zip  vincipal Office plic  Up  Other Forestee  I maximum up  | 12/18  *****  *Address                                  | 91,-25<br># Applicat                    | -01022<br>5 ***                                   | 2007<br>**1 <del>91-2</del> !      |
| 800 Laurel Oak Dr. 8205 Lim. Ste. 200 Fort Ways Naples, FL 33963  If above and results are incorrect in any way one though the incurrect information and 3. One of present of Registered to Do Business in 38. Date of cast Report 11/15/95 N/A  11/15/95 N/A  58. Capital Committuitions as Shown 50. Amount of Capital Commutations in FLORIDA to date 500, 000 Zero  8. FEES: 1) Filing Fee Computed at a rate of \$7 per \$1,000 on amount entered in 21 Supplemental Fee \$18.75 (pursuant to section 607 193, FS, 100 manual for the AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$1.38.75) AND NO NO MORE THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$1.38.75) AND NO NO MORE CHECK PAYABLE TO FLORIDA DEPT OF STATE  9. Name and Address of Current Registered Agent  Michael Oh 800 Laurel Oak Dr., Ste. 200  Naples, Florida 33963  108. Pursuant to the provisions of sections 620 1051 and 620 192 Florida Statutes a for the purpose of changing its registered office or registered agent or both in agent 1 am tambar with and accept the obligations of section 620 192 Florida Statutes (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORI  | Road  ie, IN  uniter correct  4. Sturi         | 46818 I address in Bloc o or Country of F. nd1.ana El Number       | omition   | City State & Za. New F Sur / Apr a City State & Z   | Puncipal Office  Puncip | 12/18<br>申申申申<br>e Address                              | 3/95<br>9125<br># Аррисит               | -01022<br>5 ***                                   | 2007<br>**1 <del>91-2</del> !      |
| Naples, FL 33963  If above and results are incorrect in any way one through the incorrect information and 3. Date furning or Registered to Do Business in 11/15/95  Sa. Capital Committudions as Shown ca Record 500,000  S. FEES: 1) Filing Foe Computed at a rate of \$7 per \$1,000 on amount entered in 5138.75 (pursuant to section 607.193. F.S.)  THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \cdot \$133.75) AND NO A Note in the amount entered in 5a. a supplemental fee \$138.75 (pursuant to section 607.193. F.S.)  THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \cdot \$133.75) AND NO A Note in the amount entered in 5a. a supplemental fee \$138.75 (pursuant to section 607.193. F.S.)  THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \cdot \$133.75) AND NO A Note in the amount entered in 5a. a supplemental fee and Address of Current Registered Agent  Michael Oh  800 Laurel Oak Dr., Ste. 200  Naples, Florida 33963  10a. Pursuant to the provisions of sections 620.1051 and 620.192 Florida Statutes to fine purpose of changing its registered office or registered agent or both in agent 1 am familiar with and accept the obligations of section 620.192 Florida Statutes (section 620.192 Florida Statutes (section 620.193 | 4. State In 6. Fi                              | 46818 I address in Bloc o or Country of F. nd1.ana El Number       | omition   | 28. New F<br>Sur / Apr a /<br>City State & 2  | Oplied For   | 7. C  | и Арркей                                | 349   |                                    |
| If above aggresses are incorrect in any way line through the accorrect information and 3. Date flamed or Registered to Do Business in 11/15/95 N/A  11/15/95 N/A  5a. Capital Committutions as Shown or Record. 500,000 Zero  8. FEES: 1) Filing Fee Computed at a rate of \$7 per \$1,000 on amount entered in 50 supplemental Fee \$138.75 (pursuant to section 607.193, F.S.). THE AMOUNT DUE SHALL BE NOTES THAN \$191.25 (\$52.50 + \$1.39.75) AND NOT NOTE. If the amount entered in 50 is greater that amount entered in 5a. a supplemAME CHECK PAYABLE TO FLORIDA DEPT OF STATE  9. Name and Address of Current Registered Agent  Michael Oh 800 Laurel Oak Dr., Ste. 200 Naples, Florida 33963  10a. Pursuant to the provisions of sections 620.1051 and 620.192 Fiorida Statutes to fine purpose of changing its registered office or registered agent or both in agent 1 am familiar with and accept the obligations of section 620.192 Fiorida  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORE   | 4. State II 6. Fi                              | o or Country of F.  Id I ana  I Mumber  D blank, with a m          | omition   | Sur / Apr # / City State & 2  | Oplied For   | 7. C  | и Арркей                                | 349   |                                    |
| 11/15/95  11/15/95  N/A  58. Capital Contributions as Shown or Record  500,000  8. FEES: 1) Filing Fee Computed at a rate of 37 per \$1.00 on amount entered in 2 Supplemental Fee \$138.75 (pursuant to section 607.193, F.S.)  THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \ \ \$103.75) AND NO NO NO NO NO NO NO NO IN THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \ \ \$103.75) AND NO  | 4. State  In  6. F                             | o or Country of F.  ndf.ana El Number  b blank, with a m           | ormation  | City State & 2  | ot Applicable  |   | ERTIFICATE                              | OF STATUS   | 5 REQUIRED [                       |
| 11/15/95  11/15/95  N/A  58. Capital Contributions as Shown or Record  500,000  8. FEES: 1) Filing Fee Computed at a rate of 37 per \$1.00 on amount entered in 2 Supplemental Fee \$138.75 (pursuant to section 607.193, F.S.)  THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \ \ \$103.75) AND NO NO NO NO NO NO NO NO IN THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \ \ \$103.75) AND NO  | 4. State  In  6. F                             | o or Country of F.  ndf.ana El Number  b blank, with a m           | ormation  | X A   | Oplied For<br>of Applicable<br>I maximum p   |   | ERTIFICATE                              | OF STATU  | S ALOUIRED (                       |
| 5. Capital Commissions as Snown 5. Step 1. Filing Fee Computed at a rate of \$7 per \$1,000 on amount entered in \$1. Supplemental Fee \$138.75 (pursuant to section 607.193, Fs.) THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$1.38.75) AND NO NO In the amount entered in \$51.8 preater than amount entered in \$51.8 a supplemental Fee \$1.000 or The Third State of Current Registered Apent 9. Name and Address of Current Registered Apent Michael Oh 800 Laurel Oak Dr., Ste. 200 Naples, Florida 33963  108. Pursuant to the provisions of suctions 620.1051 and 620.192 Florida Statutes a for the purpose of changing its registered office or registered agent or both an agent 1 am familiar with and accept the obligations of section 620.192 Florida SiGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORE  | 6. Fi  | ndiana<br>El Number  | immum bling fee   | X A   | Oplied For<br>of Applicable<br>I maximum p   |   | ENTIFICATE                              | OF STATUS   | 5 ACQUIRED                         |
| S. FEES: 1, Faling Fee Computed at a rate of \$7 per \$1,000 on amount entered in \$2 supplemental Fee \$138.75 (pursuant to section 607.193. F.S.)  THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (552.50 < \$138.75) AND NO NO Is the amount entered in 50 is greater than amount entered in 5a. a supplemAKE CHECK PAYABLE TO FLORIDA DEPT OF STATE  9. Name and Address of Current Registered Agent  Michael Oh 800 Laurel Oak Dr., Ste. 200 Naples, Florida 33963  108. Pursuant to the provisions of sections 620.1051 and 620.192 Florida Statutes to the purpose of changing its registered office or registered agent or both an agent I am familiar with and accept the obligations of section 620.192 Florida  SIGNATURE (Registered Agent Accepting Appointment)  | 6. Fi  | El Nomber  Dilank, with a m  | immum filing fee<br>0 + \$138 75)<br>ifted along with a | of \$52 50 and  | от Апріксяріс<br>В такітит в   |   | RTIFICATE                               | OF STATUS   | S ACQUIRED                         |
| 8. FEES: 1) Filing Fee Computed at a rate of \$7 per \$1.000 on amount entered in Supplemental Fee \$138.75 (pursuant to section 607.193. F.S.) THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 \ \$133.75) AND NO NO NOTE If the amount entered in 5s. a supplemental fee and the state of the supplemental fee and so is greater than amount entered in 5s. a supplemental fee and feeling than amount entered in 5s. a supplemental feeling feelin        | 50 or 5a if 5t<br>IORE THAN<br>Trental affiday | b blank, with a m<br>\$576.25 (\$437.5)<br>vit must be subm        | immum filing fee<br>0 + \$138 75)<br>intod along with a | of \$52 50 and  | от Апріксяріс<br>В такітит в   |   |   | · SIATO   | S AL COMED                         |
| MAKE CHECK PAYABLE TO FLORIDA DEPT OF STATE  9. Name and Address of Current Registered Agent  Michael Oh 800 Laurel Oak Dr., Ste. 200 Naples, Florida 33963  108. Pursuant to the provisions of sections 620 1051 and 620 192 Florida Statutes to the purpose of changing its registered office or registered agent or both in agent 1 am familiar with and accept the obligations of section 620 192 Florida  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORE  | 5b or 5e it 5t<br>IORE THAN<br>Trental affides | b blank, with a m<br>\$576.25 (\$437.5)<br>vit must be autom       | enmum filing fee<br>0 + \$138.75)<br>afted along with a | of \$52 50 and  | i masimum p  | 1 \$4.77  | $\sim$                                  | · <del>· · · · · · · · · · · · · · · · · · </del> |                                    |
| Michael Oh 800 Laurel Oak Dr., Ste. 200 Naples, Florida 33963  10a. Pursuant to the provisions of sections 620 1051 and 620 192 Florida Statutes to the purpose or changing its registered office or registered agent or both in agent 1 am familiar with and accept the obligations of section 620 192 Florida  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORA  |  |  |   |   |  | ling tee  | عبر<br>د ا                              | -14   | į.                                 |
| 800 Laurel Oak Dr., Ste. 200 Naples, Florida 33963  10a. Pursuant to the provisions of sections 620 1051 and 620 192 Florida Statutes to the purpose of changing its registered office of registered agent or both in agent 1 am familiar with and accept the obligations of section 620 192 Florida  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORA   |  | Name   |   | 10. # ch  | nged new A   | egstered.   | Agent Ditic                             | ,   |                                    |
| 10a. Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes to the purpose of changing its registered office or registered agent or both in agent. Familiarily with and accept the obligations of section 620 192. Florida SIGNATURE (Registered Agent Accepting Appointment).  A GENERAL PARTNER THAT IS A CORPORATION of the company o              |  |  |   |   |  |   |   |   |                                    |
| 10a. Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes : for the purpose of changing its registered office or registered eigent or both in agent. I am familiar with and accept the obligations of section 620 192. Florida SIGNATURE (Registered Agent Accepting Appointment).  A GENERAL PARTNER THAT IS A CORPORATION of the company of the corporation              |  | SHINT AC   | dress (PO idos  | Montper IF Mos  | Acceptable)  |   |   |   |                                    |
| SIGNATURE (Registered Agent Accepting Appointment)  |  | Suite Apt  | # elc   |   |  |   |   | •   |                                    |
| SIGNATURE (Registered Agent Accepting Appointment)  |  | City   |   |   |  |   |   | Zip Cone  |                                    |
| TO WEIGHT PARTNER THAT IS A CORPOR  | he above-ne<br>Ine State of F<br>Statu *       | med limited parti<br>Florida, Such che                             | nership organizo<br>irige was author                    | ng at tedisterra  | under (tie la<br>orar partner(s  | ws of the \$  | State of Flor<br>accept the             | Ga Cubmits<br>appointmen                          | this statement<br>it of registered |
| MINEN THAT IS A CONFORT   | 704  |  |   |   |  | DATE  |   | •   |                                    |
| MUST BE REGISTE   | TION,<br>REU AN                                | LIMITED<br>ND ACTIV  | PARTN   | ERSHIP  | OR 01  | HER   | BUSI                                    | NESS (  | ENTITY                             |
| MUST BE REGISTE!  11. Namers) of General Partner(s) 11a. (Do NOT Use  | Each Gene<br>Post Office                       | rai Parmer   | 11b.  | City State &  | <u></u>  |   |   | Regist  |                                    |
|   |  | OOT NUMBERS  | 110.  | - ,   | E-th Code  |   | 11c.                                    | Descursion  | t Number                           |
| Amatumn Development, Inc. 8205 Lin  | na Roa   | ıd   | Fort  | Wayne,  | IN A   | 4681  | F9                                      | 50000   | 05583                              |
| 1)  |  |  |   |   |  | - 1   |   |   |                                    |

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

12. I do hereby certily that the information suggreed with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k.) Florida Statutes. I release the Division of this annual ruport is true and accurate and that my signature shall have the same legal effects as if made under oath. I furnish certify that the information indicated on empowered to execute this true and accurate and that my signature shall have the same legal effects as if made under oath. I furnish certify that I am a General Partner of the limited partnership received of true-feet.

| SIGNATURE | M | anin | 4 |  |  |
|-----------|---|------|---|--|--|
|-----------|---|------|---|--|--|

11-30-95

ariner Signing Form Marvin L. Bok, President of general partner

Telephone Number

# B95000000411 MILLER CARSON BOXBERGER & MURPHY

Attorneys at Law

Milford M. (Tim) Miller Philip L. Carange Bruce (), Senterger Edward L. Murphy, Jr. Thomas W. Yeder Charles R. Cogdell John J. W wort Michard I. Kemek Phillip A. Rena Edward J. Lipsak Robert T. Aren, Jr. Larry I., Harmard Dinna C. Hauer James P. Burbbole Arthur E. Mandeiba Timothy A. Mauges Douglas A. Hoffman Kmi J. Verneces

September 12, 1995

Via Certified Mail Return Receipt Requested #Z 240 782 749

Florida Department of State Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

000001586700 -09/18/95--01012--001 \*\*\*1785.00 \*\*\*1785.00

Re: 611 10th Avenue L.P.
Application by Foreign Limited
Partnership for Authorization
to Transact Business in Florida

Dear Sir or Madam:

Enclosed please find an original and one copy of the Application by Foreign Limited Partnership for Authorization to Transact Business in Florida of 611 10th Avenue L.P. Also enclosed is the Affidavit of Capital Contributions of the Corporation and a check made payable to the Florida Department of State in the amount of \$1,785. This check is to cover the fee for capital contributions and the \$35 designation of registered agent fee.

Please record these documents and return a file-marked copy to the undersigned in the enclosed self-addressed, stamped envelope. Thank you for your cooperation and assistance.

Very truly yours,

11/15/950

Arthur E. Mandelbaum

AEM:skj Enclosures

cc: Marvin L. Bok

¥ 189,509, At 1,691

MILLER CARSON BOXBERGER & MURBHY

1195000018460

One Summit Square Suite 1400 Fort Wayne, Indiana 46802-3173

Telephone: 219/423-9411 Facsimile: 219/423-4329

Member of Commercial Law Affiliates with Offices in Principal Cities World Wide



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 18, 1995 -

ARTHUR E. MANDELBAUM, ESQUIRE MILLER, CARSON, BOXBERGER & MURPHY ONE SUMMIT SQUARE, STE. 1400 FORT WAYNE, IN 46802-3173

F95-5583

SUBJECT: 611 10TH AVENUE L.P. Ref. Number: W95000018760

We have received your document for 611 10TH AVENUE L.P. and your check(s) totaling \$1785.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must add a limited partnership suffix to the name, such as LTD., LIMITED, or LIMITED PARTNERSHIP.

Every corporation, limited partnership, general partnership, or trust listed as a general partner of a limited partnership or a managing member or manager of a limited liability company must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6920.

Ava Watson Corporate Specialist

Letter Number: 595A00042802

#### Floride Department of State, Jim Smith, Secretary of State

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

| 1. 611 10th Avenue Limited Partner (Name of limited partnership as it is in the l  | ship                   | B95000                            | 000411             |
|--|------------------------|-----------------------------------|--------------------|
| 20 K 13 K 14 K 19  | COLING STREE!          |                                   |                    |
| 2 611 10th Ltd.  |                        |                                   |                    |
| .(If name is unavailable, name under which transact business in Florida; must contain the  | the limited parts      | Serebia accessor                  |                    |
| transact business in Florida; must contain the   | he word "LIMITE        | renship propose<br>FD" or "LTD "\ | s to register or   |
| 3. Indiana   |                        | •                                 |                    |
| (State of Formation)   | 4May                   | 23, 1995                          |                    |
| (College of Contraction)   |                        | (Date of Fe                       | ormation)          |
| 5. Michael Oh  |                        |                                   |                    |
| (Name of Registered Agent  | for Service of I       | Process)                          |                    |
| 6 800 Laurel Oak Dr., Suite 200  |                        | ,                                 |                    |
| (Street Address of Regist  | tered Office)          |                                   |                    |
| Naples   | _                      |                                   | 995<br>ALL         |
| (City)   | , Florida <sub>-</sub> | 33963                             |                    |
| , ,  |                        | (Zip Code)                        | AS:                |
| 7.Acceptance by the Registered Agent for Se  | ervice of Proces       | S.                                | 25 F               |
| \\\a_1 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\   |                        |                                   | _್ಷ ≩ ೦            |
| (Agent must sign on thi  | e line)                |                                   | <u> </u>           |
| _  | - /                    |                                   | DA B               |
| 8. 8205 Lima Road, Fort Wayne, IN 4681   | 8                      |                                   |                    |
| (Address of Registered Office required in Sta<br>Principal Office.)  | ate of Formation       | or, if not requi                  | red, Address of    |
| 9. NAME OF GENERAL PARTNERS  |                        | CDEOLEIO A                        |                    |
|  |                        | SPECIFIC A                        | DDRESS             |
| Amatumn Development, Inc.  |                        | 8205 Lima Ro                      | ađ                 |
|  |                        | Fort Wayne,                       | IN 46818           |
|  |                        |                                   |                    |
| 108205 Lima Road, Fort Wayne, IN 4   | 6818                   |                                   |                    |
| (Office where Names, Addresses an  | d Contributions        | of Limited Parti                  | ners are kent \    |
| 1. The limited nartnership will undertake to be  |                        |                                   |                    |
| contributions of the limited partner or limited par | artners until the      | limited partners                  | hip's registration |
| 2. 8205 Lima Road, Fort Wayne, IN 46818  | 8_                     |                                   |                    |
| (Mailing Address of  | of Limited Partn       | ershin)                           |                    |

|            | <u>.</u> •   |  |
|------------|--|--|
| This       | twenty-fift day of August  | 9_95 .   |
| •          | AMAIUMN DEVEL PMEAT INC  | 9 <u>95</u> .  |
| -          | By Marvin L. Bok.  | President  |
|            | General Partner  | ·· cardent   |
|            |  |  |
| STATE O    | F INDIANA  |  |
| COUNTY     | OF ALLEN   |  |
| THE FOR    | FGOING in-   |  |
| Of August  | EGOING instrument was acknowledged and so 19 95, by Amaruum Development in | yprn to before me this 25th  |
|            | Amatumn Development. In  | (Name of General Partner) of   |
| 611        | 10th Avenue L.P.   | Granding Gra |
| (Name of I |  |  |
| Partnershi | D. on behalf of the Limited Partnership.                                   | (State or Country) Limited   |
|            | on boliair of the Limited Partnership.                                     | Cooling y) Chilled   |
| **         | Myol alux  |  |
|            | Notary Public  | <del>-</del>   |
|            | State of <u>Indiana</u> at Large   | ㅋ., =  |
| (SEAL)     |  | Section 1985   |
| •          | My Commission Expires:   | LAIL NO TH   |
|            | 08/28/97   |  |
|            |  | ASSECTION ASSECTION  |
|            |  |  |
|            |  |  |
|            |  | FILED NOV 15 M ID: 10  |
|            |  | DA G   |
|            |  |  |

## AFFIGAVIT OF CAPITAL CONTRIBUTIONS

| indiana  | 611 10th Avenue L.P.                                 | Marvin L. Bok, Amatumn Develo   | · · · · · · · · · · · · · · · · · · ·                      |
|--|--|---|--|
| certifies as follows:  | - Politicist   | p, hereinafter referred to a  | s the "Partnership", w                                     |
| 1. The amount of a   | annial   |   |  |
| THE AMOUNT OF  | capital contributions of t                           | the limited partners is \$500   | ,000   |
| 2. The anticipated   | amount of the capital o                              | Xatributions of the limited   |  |
|  |  | contributions of the limited string in Florida is \$500,000                               | partners that are allo-<br>                                |
| inis twenty-liftly   | ay of August   | _, 19_95  |  |
| FURTHER AFFIANT  | SAYETH NOT,  |   |  |
| Inder penalties of per   | riury I declary that I have                          | e sand the s  |  |
| o the best of my know  | wedge and belief.                                    | e read the foregoing and t  | that the facts are true                                    |
|  |  |   |  |
|  | Genr   | eral Partner  |  |
|  | AMAJUMN DEVELOP                                      | MENT ANCO   | 1  |
|  | Marvin L. Bok  | 1 DE Trevia   | ert  |
|  | mar viri L. BOK                                      | , President   |  |
|  | 1  |   | TALL<br>VEC  |
|  |  |   | 巨直型  |
|  |  |   | 55   |
| ATE OF INDIANA   | <del></del>  |   |  |
| DUNTY OF ALLEN   | <del></del>  |   |  |
| TE August 25, 1995   | 5  |   | SE   |
| FORF ME the under  | animum and refer                                     |   | DA TO  |
| and midel  | in and for the State and                             | / Public authorized to adm  | inister paths and to                                       |
| ce acknowledgments   | dent of the Grand and                                |   |  |
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