\* Docu<u>ment</u> Number Only 5000 0000 g T CURPURATION BYSTEM Requester's Name 660 East defferson Street Addross Tallabassee, Florida City 900001740189 -03/12/96--01104--014 ++++87.50 ++++87.50 Sinte Phone 904-222-1092 СОПРОПАТІОН(S) НАМЕ Sycom Enterprises Lmited Partnership () Profit () NonProfit () Amendment () Merger () Limited Liability Company () Forelan () Dissolution/Withdrawal () Mark XILImited 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 () After 4:30 Walk In () Will Walt Pick Up () Mall Out MAITIA 13/8/46 3/8/76 Avallability PLEASE RETURN EXTRA COPY(S) Dōcümənt FILE STWIFED ... Exambor Ujzdaler J. TAX Vāilliāt FILING \_\_\_\_\_ N. AGENT FEE 35 UU Acknowledginent C. COPY 1014 87.50 W.P. Veriller E STATE TO STATE OF THE STATE O 3/ LANGE DUE CR2E031 (1-89) TEMP ....

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

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

			्र केस इ.स.
1. SYCOM ENTERPRISES L	IMITED PART	CNERSHIP	
(Name of limited partnership as it is in the hon	ne state;		8 02B
_			2
2.	Hadinal and	norehin proposes	to realizer of
(If name is unavailable, name under which the	nuq benimi Tikal III beess	TED" as "I TO "	to register dis-
transact business in Florida; must contain the	word Lilviii	ED OF LIDIT	- Ti
2	4.	September 18,	1990
3. <u>Delaware</u> (State of Formation)	''	(Date of For	mation)
lotate of community		•	
	ORATION SYS		
(Name of Registered Agent	for Service	of Process)	
6G/o C T Corporation 1	gustem. 120	O South Pine Isla	nd Road
(Street Address of Re	gistered Of	fice)	
Plantation	, FI	lorida <u>33324</u>	
(City)		(Zip Code	1)/
· · · · · · · · · · · · · · · · · · ·	vice of Proce	occ 10 /	r
7. Acceptance by the Registered Agent for Serv	ice of Toca	55.//	
NWW	ヽ゚ヽ゚ヿ゙゚゚゚	10 A	
Officer must s	ign on this I	ine)	
Kevin J. Gallagher, Assi			
(Type Name and			
Shu	and tilled	naton Dolawara	19801
8. Corporation Trust Center, 1209 Orange Str (Address of Registered Office required in Sta	te of Forma	tion or, if not requ	ired, Address o
Principal Office.)		,	·
•		00501510 4000	TCC
9. NAME OF GENERAL PARTHERS		SPECIFIC ADDR	
SYCOM Corporation F96000001207	1010 Wisc	consin Avenue, N.I	W., Suite 340
(General Partner)	Washingto	on, D.C. 20007	
(Aguarat taremer)	-	•	
10. 1010 Wisconsin Avenue, N.W., Suite 340,	Washington	, D.C. 20007	1 1
(Office where Names, Addresses and	Contribution	ns of Limited Parth	ers are kept.)
11. The limited partnerhsip will undertake to	keep the re	cords listing the a	ddresses and
capital contributions of the limited partner or iii	mitea partin	ers until the limited	l partnership's
registration in Florida is cancelled or withdrawn	I.		
12. 1010 Wisconsin Avenue, N.W., Suite 340,	Washington	, D.C. 20007	<del></del>
(Mailing Address of	Limited Par	tnership)	

This 37th day of Jebruary, 1976.  General Partner  S. Lynn Sutcliffe, President & CEO	
SYCOM Corporation (General Partner)	P E
STATE OF Mary/and	二頭
COUNTY OF Montgomery	O.
THE FOREGOING instrument was acknowledged and sworn to before me this 27 of February, 19 96, by S. Lynn Sutcliffe (Name of General Parsycom enterprises Limited Partnership	
(Name of Limited Parntership), A <u>Dolawaro</u> (State or Country) I	Limited
Partnerhsip, on behalf of the Limited Partnership.	
Notary Public T State of <u>Haryland</u> at Large  (SEAL)  My Commission Expires:	
(SEAL) My Commission Expires:	

## **AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

......

		SYCOM Corporation	1	
BEFORE ME, the undersign general partner of SYCOM E	ed, personally appeared	S. Lynn Sutcliff	<u> </u>	
general partner of SYCOM E	nterraises einited r	referred to as the "Pai	tnershin" who	
certifies as follows:	2 paraterating, nerestation	10101104 10 40 1110 1 41	moromp ; mio	
1. The amount of capital cor	ntributions of the limited p	partners is \$ o		
	,			
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$_0				
This 27 the day of 1	Frbruary , 1996.			
FURTHER AFFIANT SAY	, , , , , , , , , , , , , , , , , , ,			
			A A!	
Under penalties of perjury I true, to the best of my knowledge	declare that I have read added	the foregoing and tha	it the facts are	
			# E	
	General Par	tner	HAR-8	
	Shynn Sute		00 000	
	S. Lynn Sutcliffe, Pre	Aldent & CEO		
	SYCOM Corporation		19 EE	
	STOW COLDSTALLOW		二 最	
STATE OF / (applaind COUNTY OF Hontapmery DATE 2/34/96)			ัก	
BEFORE ME, the undersigned	ed officer, a Notary Public	authorized to adminis	ter oaths and	
to take acknowledgments in a	and for the State and Cou	unty set forth above, pe	ersonally ap-	
peared S. Lynn Sutcliff me to be the person who exe	<u>e (Generaling Affid</u>	al Partner, known to m	e and known by	
acknowledged to me and bef	ore me that he executed	this Affidavit as Gener	al Partner of said	
partnership.			<b></b>	
IN WITNESS WHEREOF, I h	ave hereunto set my har	nd and affixed my offici	al seal, in the	
State and County aforesaid,	his 2 7+2 da	ay of <u>February</u>	·	
19 <u>96</u> .		$\circ$		
	( ) indeth (	Lasquene		
•	Notary P	ublic /		
Seal	State of Mary/and	at Large		
	My Commission Expires:			
	April 29 1996	<u>,                                    </u>		