Bocument Number Only	00	200	300	
C T CORPORATION SYSTE	М			
Requestor's Name 660 East Jefferson St	Timat			`* - 1
Address				A O
Tallahassee, Florida City State Zip	32301 Phone		runnul	., ., ., ., .
CORPORATION			***	•••
() Profit () NonProfit () Limited Liability Company () Foreign	() Amend		() Merger	
(-) Limited Partnership	() Annual	Renort	() Other	_
() Reinstatement	() Reserva		() Change of R.A.	•
() Limited Liability Partnersh () Certified Copy	() Photo (Copies	() Fictitious Nat () CUS	<u>π</u> e
() Call When Ready () Walk In () Mail Out	() Call if P () Will Wa	roblem it	() After 4:30 - () Pick Up	•••
Name Availability	· · · · · · · · · · · · · · · · · · ·			_
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Updater	. <i>.</i> /	TLANG		
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N P. Veriller		1327 Heat sport		\

CR2E031 (1-89)

Florida Department of State, Jim Emith, Secretary of State

APPLICATION BY FOREIGN LIN... ED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1 ACQUIPORI/AMSDELL IL LIMITED PARTNERSHIP		*
(Name of limited partnership as it is in the home state,		
2. *		72
(If name is unavailable, name under which the limited p transact business in Florida; must contain the word "LIN	artnershi MITED" or	p proposes to register or "LTD.")
3. pelaware 4. j. (State of Formation)	<u>ulv 25. 1</u>	996
(State of Formation)	((Date of Formation)
5. <u>C T CORPORATION S</u> (Name of Registered Agent for Service)	e of Proc	ess)
6. <u>c/o C T Corporation System, 1</u> (Street Address of Registered	200, sout) Office)	Pine Island Road
Plantation	Florida	
(City)		(Zip Code)
7. Acceptance by the Registered Agent for Service of Pro (Officer must sign on this		
Francis Regan, Asst. Secy. (Type Name and Title of C	Officer)	
8. 6745 Engle Road, Suite 300, Middleburg He	ights, OH	44130
(Address of Registered Office required in State of Form Principal Office.)	nation or,	if not required, Address of
9. NAME OF GENERAL PARTNERS		IFIC ADDRESS
		ead, Suite 300 eights, OH 44130
7 (Y) 10 6745 Engle Road, Suite 300, Middleburg Heights, (OH 44130	
(Office where Names, Addresses and Contribution		
11. The limited partnerhsip will undertake to keep the reapital contributions of the limited partner or limited partner egistration in Florida is cancelled or withdrawn.	ecords lis	sting the addresses and
12. 6745 Engle Road Suite 300, Middleburg Heights, C)H 44130	

This	General Partner	
STATE OF		
COUNTY O	F	
THE FOREG	FOING instrument was acknowledged and sworn to $\frac{19^{\frac{2}{16}}}{\sqrt{2}^{\frac{2}{16}}}$, by $\frac{f_{1}f_{2}}{f_{2}g_{3}}$, $\frac{\mathcal{T}}{f_{3}g_{3}}$	to before me this <u>3/4</u> day
	mited Parntership), A <u>b lawar</u> /	(State or Country) Limited
Partnerhsip, ——— (SEAL)	Notary Public State of at Large My Commission Expires:	Notate 1 p. 15 FAL." Notate 1 p. 15 FAL." Notate 1 p. 15 FAL." Notate 1 p. 15 FAL. Total State 1 p. 15 FAL. Notate 1 p. 15 FAL. State 1 p. 1

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

	ersigned, personally appeared OUTFORT/AMSDELL TI L.P. a (a	n) —
certifies as follows:	limited partnership, hereinafter referred	to as the "Partnership", who
1. The amount of capit	ital contributions of the limited partners i	5.\$ 18.547 600.00
	and managed partitions	3 4 , 111, 1111, 111
The anticipated amoreted for the purposes of the purpose of the pur	ount of the capital contributions of the lir of transacting business in Florida is $\$_{-2}$	mited partners that are allo-
Thisday o	of, 19_96	
FURTHER AFFIANT S		
true, to the best of my ki	ury I declare that I have read the foreg nowledge and belief	joing and that the facts are
	AMADES A SECTION	(? ()
	AMSDELL PARTNERS, INC. General Partner	
	General Partner	1
	By: TILE:	
STATE OF TC.		
STATEOF		•
COUNTY OF COURT	- -	
BEFORE ME the unders	HUHEN DINCER 2 NAtao, Dublio	
BEFORE ME, the unders to take acknowledgments	in and for the State and County set for	d to administer oaths and
BEFORE ME, the unders to take acknowledgments peared Chart J. Ams demonstration me to be the person and the control of the person and the per	in and for the State and County set for (General Partner,	d to administer oaths and the above, personally ap-known to me and known by
me to be the person who	General Partner,	in above, personally ap- known to me and known by
me to be the person who acknowledged to me and partnership.	executed the foregoing Affidavit of Cap before me that he executed this Affidav	in above, personally ap- known to me and known by ital Contributions, and he /it as General Partner of said
me to be the person who acknowledged to me and partnership.	executed the foregoing Affidavit of Cap before me that he executed this Affidav	in above, personally ap- known to me and known by ital Contributions, and he /it as General Partner of said
me to be the person who acknowledged to me and partnership.	General Partner,	in above, personally ap- known to me and known by ital Contributions, and he /it as General Partner of said
me to be the person who acknowledged to me and partnership. IN WITNESS WHEREOF State and County aforesail 19 1/5	executed the foregoing Affidavit of Cap before me that he executed this Affidav	in above, personally ap- known to me and known by ital Contributions, and he /it as General Partner of said
me to be the person who acknowledged to me and partnership. IN WITNESS WHEREOF State and County aforesail 19 1/5	executed the foregoing Affidavit of Cap before me that he executed this Affidav	in above, personally ap- known to me and known by ital Contributions, and he /it as General Partner of said
me to be the person who acknowledged to me and partnership. IN WITNESS WHEREOF, State and County aforesai 19_/6	executed the foregoing Affidavit of Cap before me that he executed this Affidavit, I have hereunto set my hand and affix id, this day of	tri above, personally ap- known to me and known by ital Contributions, and he vit as General Partner of said ed my official seal, in the