1201 HAYS STREET 800-342-8086 TALLAHASSEE, EL 12301-2607

networks PRESENT HALL LIGAL & ENANCIAL SERVICES

ACCOUNT NO. ;

072100000032

REFERENCE : 091100

4814233

AUTHORIZATION

ORDER DATE: September 19, 1996

ORDER TIME : 10:50 AM

ORDER NO. : 091100

CUSTOMER NO:

4814233

CUSTOMER: Peggy Bailey, Esq Morris Manning & Martin

1600 Atlanta Financial Center

3343 Peachtree Road, N. E.

Atlanta, GA 30326

7nd

100001956671...

FOREIGN FILINGS

W4600020257

NAME: CLAYTON-TARA, L.P.

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Daniel W Leggett

4/2.5/G

Florida Department of State, Sandra B. Mortham, Secretary of State

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

| 1. | CLAYTON-TARA, L.P. | |
|----|--|---|
| | (Name of limited partnership | as it is in the home state) |
| 2. | CLAYTON-TARA, L.P., LTD. | |
| | (If name is unavailable, name under which the limited par | thership proposes to register or transact business is |
| | Florida; must contain the word | "LIMITED" or "LTD. ")" |
| 3. | Georgia | _ 4. 8/6/93 |
| | (State of Formation) | (Date of Formation) 2 77 |
| 5. | Corporation Service Company | છે. તુંસ |
| • | (Name of Registered Agent 1 | for Service of Process) |
| , | 1201 Vava Camana | |
| 0 | 1201 Hays Street (Street Address of Re | 777-106m |
| | Tallahassee | វីភ |
| - | (City) | , Florida |
| | (0.9) | (Zip Code) |
| | Suite 105, 2550 Heritage Ct., N.W., At (Address of registered office required in state of formatic IAMES OF GENERAL PARTNERS | tlanta, Georgia 30339 on or, if not required, address of principal office.) |
| | F46000044 | Suita Las assa n |
| W | hitman Investment Co., Inc. | Suite 105, 2550 Heritago Ct., Atlanta, Georgia 30339 |
| | | |
| 0 | Suite 105, 2550 Heritage Ct., N.W., At (Office where Names, Addresses and Contribu | tlanta, Georgia 30339 |

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of the limited partner or limited partners until the limited partnership's registration in Florida is cancelled or withdrawn.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. Suite 105, 2550 Her | itago Ct., N.W., Atlanta, Georgia 30339 | |
|--|---|-------------|
| | | |
| | (Mailing Address of Limited Partnership) | |
| Under penalties of perjury I, be the contents thereof and that the | being duly sworn, declare that I have read the foregoing and line the facts stated herein are true and correct. Saptember 19 96 73 | *ccsel |
| This day of 24^{+-} , | September 19 96 77 | |
| Ву: | INVESTMENT CO., INC., General Partner Gaza Proces we D. Whitman, President | or STATIONS |
| • | | |
| COUNTY OF Fulton | | |
| On this 24 day of Sep | tember , 19 96 , Howe D. Whitman | |
| personally appeared before me, | | |
| | whose identity I proved on the basis of a valid dec | co is |
| | drivers license | |
| | Peggy J. Baile (Notary Public Lignature) Reggy J. Baile (Notary) Printed Name) | |
| Seal | My Commission Expires: | |

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

| BEFORE ME the undersigned personally appeared | Howe D. Whitman, as President of Whitman Investment Co., Inc. |
|--|--|
| a general partner of CLAYTON-TARA, L.P. | . a (an) Georgin limited partnership |
| hereinafter referred to as the "Partnership", who ce | |
| 1. The amount of capital contributions of the limited | partners is \$ 1,352,825 |
| 2. The anticipated amount of the capital contribution | s of the limited partners that are allocated for the |
| purposes of transacting business in Florida is \$ 1,3 | 352,825 |
| Under the penalties of perjury I, being duly sworn, a | leclare that I have read the foregoing and know the |
| contents thereof and that the facts stated herein are | true and correct. |
| This 24th day of September | 96 SEP 25 |
| WHITMAN INVESTMENT CO., | INC., General Partner |
| By: // sar | INC., General Partner |
| Howe D. Whitman, F | resident |
| STATE OF Georgia | |
| COUNTY OF Fulton | |
| On this again day of September | , 19 96 , Howe D. Whitman |
| | sonally known to me |
| whose ident | tity I proved on the basis of a valid Georgia |
| <u>drivers li</u> | cense |
| | |
| <u>(2)</u> | Ball. |
| D. | UV() (Nothry Public Signature) |
| | (Notary & Printed Name) |
| Scal My Con | mmission Expires: |
| NOTARY PUBLIC, FULTON COUNTY, GEORGIANT 1741 OF MISSION EXPIRES JUNE 12, 1998 | TARY : TO THE TON COUNTY, GEORGE AN COV. |

B960000377

| P. | QUITIES INCORPORATED O. Box 725589 Ita, Georgia 31139 | TSEP-5 PH P |
|-------------------------------|---|--|
| City/State | e/Zip Phone # | Office Use Only 가 |
| CORPORATION | I NAME(S) & DOCUMENT N | UMBER(S), (if known): |
| 1. Clay f | on Tara, L.ρ. poration Name) | (Document #) |
| 2(Cor | poration Name) | (Document #) |
| • | | |
| (Cor | poration Name) | (Document #) |
| 4(Cor | poration Name) | (Document #) |
| | , | , |
| □ Walk in | Pick up time | _ Certified Copy |
| Mail out | ☐ Will wait ☐ Photocopy | Certificate of Status |
| NEW FILINGS | AMENDMENTS | 14-12-4-1-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1- |
| Profit | Amendment | 20 M 2 M 2 M 2 M 2 M 2 M 2 M 2 M 2 M 2 M |
| NonProfit | Resignation of R.A., Officer/ Di | rector |
| Limited Liability | Change of Registered Agent | |
| Domestication | Dissolution/Withdrawal | 500002288135 ೯ |
| Other | Метдет | -09/05/9701057003 ****140.00 *****35.00 |
| OTHER FILINGS | REGISTRATION/ | |
| | QUALIFICATION | |
| Annual Report Fictitious Name | Foreign | |
| Name Reservation | Limited Partnership | |
| Maile Reservation | Reinstatement | |
| | Trademark | |
| | Other | |

CR2E031(1/95)

Examiner's Initials

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

| Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersi | gned lin | nited | |
|---|-------------------------|----------------|---|
| partnership organized under the laws of the state of Georgia | , submit | s the | |
| following statement in order to change its registered office or registered agent, or both, ir | ı the sta | 16/21 | |
| Florida. | SSEE. | P-5 PH | |
| 1 Olaska Waga I D | <u></u> | | ` |
| 1. Clayton-Tara, L.P. Name of the limited partnership | 11:25 12:25 13:25 | (2) | |
| 2. 9/25/96 3. 189600000377 | •- | | |
| Date of filing/registration in Florida Document number | er assign | ed | - |
| 4. The name and address of the present registered agent and office: | | | |
| Corporation Service Company | | | |
| Karen B. Rozar, Agent | | | |
| 1201 Javes Street, Suite 105, Tallahassee, FL 32301 | | | |
| 5. The name and street address of the successor registered agent and office: (P.O. Box n acceptable) | <u>ot</u> | | |
| E. Snow Martin, Esq. | | | |
| 200 Lake Morton Dr. | | | |
| Lakeland, Florida 33802 | | | |
| Such change was authorized by the general narmers. | | | |
| (Maccallelle 8/25/77 | | | |
| Signature of General Partner Date | | | |
| Having been named as registered agent and to accept service of process for the above stated and the place designated in this certificate, I hereby accept the appointment as a significate agree to act in this capacity. I further agree to comply with the provisions of a celative to the proper and complete performance of my duties, and I am familiar with and a blivation of my position as registered agent. | register | red | |
| 9 - m x / m x y as 100s | , | | |

Filing Fee: S35.00

Registered Agent signature