

B96000000.388

Due West Ventures, Ltd.
1502 Farrindon Circle
Heathrow, Fl. 32746
(407) 805-0861

September 29, 1996

Sandra B. Mortham
Secretary of State
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

400001962364
-10/02/96--01017--002
***148.75 ***148.75

Dear Ms. Mortham,

Enclosed please find the application for registration of a foreign limited partnership in the state of Florida. I have also enclosed a check for \$148.75, which should cover the costs for registration (\$52.50), designation of registered agent (\$35.00), certified copy (\$52.50), and a certificate under seal (\$8.75).

I can be contacted at the address and telephone number listed on the letterhead. Please send the acknowledgment to my attention to the address listed on the letterhead.

Sincerely,



David L. West

Enclosure
ldw

B96-388

Name	DLW
Availability	10/8
Document Examiner	DLW
Updater	DLW
Updater Verifier	DLW
Acknowledgement	DLW
W. P. Verifier	DLW

FILED
96 OCT -2 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

FILED
OCT -2 AM 9:57
CLERK OF STATE
TALLAHASSEE, FLORIDA

1. Due West Ventures, Limited

(Name of limited partnership as it is in the home state)

2. Go West Ventures, Limited

(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. Texas

(State of Formation)

4. August 2, 1996

(Date of Formation)

5. David L. West -President- Due West Enterprises, Inc.

(Name of Registered Agent for Service of Process)

6. 1502 Farrindon Circle

(Street Address of Registered Office)

Heathrow

(City)

, Florida

32746

(Zip Code)

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



(Agent must sign on this line)

8. 813 Moore Avenue, Portland, Texas 78374

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

Due West Enterprises, Inc.

1502 Farrindon Circle
Heathrow, Fl. 32746

F96000005177

10. 1502 Farrindon Circle, Heathrow, Fl. 32746

(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.

CONTINUED

12. 1502 Farrindon Circle
Heathrow, Florida 32746

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This day of 30, September, 19 96.

David L. West

General Partner

STATE OF

FLORIDA

COUNTY OF

SEMINOLE

On this 30 day of September, 19 96, DAVID L. WEST

personally appeared before me,

☐ who is personally known to me

☒ whose identity I proved on the basis of TX DL
13070637



Elizabeth M. Gray

(Notary Public Signature)

ELIZABETH M. GRAY

(Notary's Printed Name)

Seal

My Commission Expires: _____

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED
PARTNERSHIP**

BEFORE ME the undersigned personally appeared David L. West,
a general partner of Duc West Ventures, Ltd. (an) Texas limited partnership,
hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 2000.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 2000.00.

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 30 day of September, 19 96.

David L. West
General Partner

FILED
95 OCT -2 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

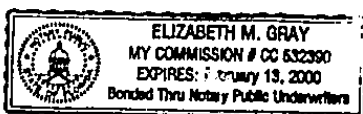
COUNTY OF SEMINOLE

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personally appeared before me,

☐ who is personally known to me

☒ whose identity I proved on the basis of TX DL
13070637



Elizabeth M. Gray
(Notary Public Signature)
ELIZABETH M. GRAY
(Notary's Printed Name)

Seal

My Commission Expires: _____