CAPITAL CONTECTION, INC. 417 E. Virginia Breet, State 1 - Mallaharder Florid 182-02 (850) 224-8870 1-60-342-062 - Fal (8 0) 22-122

Claxton Square	5000023102358 -10/02/9701064019 *****700.00 *****350.00
Paudnership	97 SEP
Signature Requested by: Requested by: Name Date Time	Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search
Walk-In Will Pick Up	UCC 11 Retrieval



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 22, 1997

DAVID C. KEATING WALSH & KEATING, S.C. 1505 WAUWATOSA AVENUE WAUWATOSA, WI 53213

SUBJECT: CLAXTON SQUARE NUMBER ONE LIMITED PARTNERSHIP

Ref. Number: W97000021742

We have received your document for CLAXTON SQUARE NUMBER ONE LIMITED PARTNERSHIP and your check(s) totaling \$350.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership 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.

Section 620.108, Florida Statutes, requires the certificate include the names and street addresses of the general partners.

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 (850) 487-6025.

Letter Number: 497A00046936

Cathy A Mitchell Corporate Specialist

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

1	CLAXTON SQUARE NU	JMBER ON	E LIMITED	PARTNERSHIP		
	(Name of l	limited partner	rship as it is in	the home state)		
2						2
2	(If name is unavailable, name unde in Florida; r	r which the lin nust contain th	nited partnershi ne word "LIMT	ip proposes to register or trans TED" or "LTD.")	sact, bysine	SECRE
_	G	4	December	30, 1994	- 4	<u> </u>
3.	Georgia (State of Formation)		December	(Date of Formation)	30	<u> </u>
	(State of Pormation)				=	
5.	August Urbanek					CORPURA
	(Name of Registered Agent for Service of Process)			 		
_	THE First Atlantia Avany	^				ا در ـــــــ
6.	777 East Atlantic Avenue	Street Address	of Registered	Office)		
	`	(502 000 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
	Delray Beach		_, Florida	33483		
8.	CT Corporation System Atlanta, Georgia 30361 (Address of registered office required)	, 1201 Peacl		NW, Suite 1240,	cipal office	 e.)
	(Address of registered office requi	red in state of	tormanon or, n	i not required, assistant or princip	<u>-</u>	•
9	. NAMES OF GENERAL P	ARTNERS		STREET ADDRESS		
	August Urbanek, Truste August Urbanek Family U/T/A Dated 9/8/93	e of the	Trust	777 E. Atlantic Avenue Delray Beach, FL 3348		
		Addresses and	l Contributions	of Limited Partners are kept.		
1	 The limited partnership capital contributions of the partnership's registration 	he limited p	artner or 📖	nited partners until the	iuresses : limiteds	апи

CONTINUED

(Mailing Address of Limited Partnership)

(Notary Public Signature)

David C. Keating
(Notary's Printed Name)

Seal

My commission Expires: (s permanents)

DAVID C. KEATING

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared August arbanck Truste,
CLAXTON SQUARE NUMBER a general partner of ONE LIMITED PARTNERSHIP, a (an) Georgia
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:
1. The amount of capital contributions of the limited partners is \$45,000.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$45,000.00.
Under the penalties of perjury I, being duly sworn, declare that I have read the fopregoing and know the contents thereof and that the facts stated herein are true and correct.
 Iimited partnership, hereinafter referred to as the "Partnership", who certifies as follows: The amount of capital contributions of the limited partners is \$45,000.00. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$45,000.00. Under the penalties of perjury I, being duly sworn, declare that I have read the fopregoines and know the contents thereof and that the facts stated herein are true and correct. This 26 day of September, 1997
General Partner
STATE OF WISCONSTAN
COUNTY OF MELWAUKEE
On this 26 m day of Sprench, 1997, August Cerlanek, personally appeared before me,
August Cerlanek, personally appeared before me,
who is personally known to me
whose identity I proved on the basis of
Notary Public Signature)
David C. Keating (Notary's Printed Name)
Seal My commission Expires: is permanent