

	1 CONFORMITC	W SISIEM		
6	60 EAST JEFF	ERSON STR	EET .	
Request	or's Name ALLAHASSEE,	FL 3230	1 .	-
Address				
_		2	22-1092	
City	State	Zìp	Phone	

200002398882--5 -01/13/98--01086--020 *****96.25 ******96.25

CORPORATION(S) NAME

OL Hold	lings, Limited Partural	no l
		1 1 39
	10-87.50	The VEIX
·	1007 5075	1 1/201
	CINC DITT	
() Profit		
() NonProfit () Limited Liability Co	() Amendment	() Merger
() Foreign	() Dissolution/Withdrawal	() Mark
() Limited Partnership	() Annual Report	() Other
() Reinstatement	() Reservation	() Change of R.A.
() Cortified Copy	() Phata Oasia	() Fictitious Name Filing
() Certified Copy	() Photo Copies	CUS
() Call When Ready	() Call if Problem	() After 4:30
Walk In () Mail Out	() Will Wait	Pick Up 2
() Mail Out		OF THE STATE OF TH
Name		<u> </u>
Availability	JAN 1 3 1998	EIVED 30RPORATION
Document Examiner		
	-	
Updater		Thanks,
Verifier	File Second	Jeff
Acknowledgment	11/2	
•		BR Thales
W.P. Verifier		11 - 1/ 11/2)
<u> </u>		

CR2E031 (1-89)

Sandra B. Mortham, Secretary of State

1OL_HOLDINGS, LIMITED PARTNERSHIP (Name of limited partnership as it is in the home state; 2N/A (If name is unavailable, name under which the limited partnership proposes to register or transact business in	APPLICATION BY FOREIGN LIMITE TO TRANSACT B	ED PARTNER BUSINESS IN	RSHIP FOR AUTHORIZA FLORIDA	TION
(Name of limited partnership as it is in the home state; 2. N/A (If name is unavailable, name under which the limited partnership proposes to register or transact business in Frontag must contain the word "LIMITED" or "LTD.") 3. Indiana 4. January 7, 1998 (State of Formation) (Date of Formation) 5. C T CORPORATION SYSTEM (Name of Registered Agent for Service of Process) c/o C T Corporation System 6. 1200 South Pine Island Road (Street Address of Registered Office) Plantation , Florida 33324 (City) 7. Acceptance by the Registered Agent for Service of Process. C T CORPORATION SYSTEM SINIE BRYAN (Agent mist sign on this line) 111 East Wayne Street, Suite 500 8. Fort Wayne, Indiana 46802 (Address of registered office required in state of formation or, if not required, address of principal office.) 9. NAMES OF GENERAL PARTNERS SPECIFIC ADDRESS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802.	1 OL HOLDINGS, LIMITED PARTNERSH	ΙΤΡ	98 JAK	SCORE TO
2N/A (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			to:	702Fm
(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. Indiana	(Name of minted parties sup as it	is in the nome star	<i>بى</i>	900
(State of Formation) 5. C T CORPORATION SYSTEM (Name of Registered Agent for Service of Process) c/o C T Corporation System 6. 1200 South Pine Island Road (Street Address of Registered Office) Plantation (City) 7. Acceptance by the Registered Agent for Service of Process. C T CORPORATION SYSTEM SPECIAL ASSISTANT SECRETARY (Agent mest sign on this line) 111 East Wayne Street, Suite 500 8. Fort Wayne, Indiana 46802 (Address of registered office required in state of formation or, if not required, address of principal office.) 9. NAMES OF GENERAL PARTNERS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802 112 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802	(If name is unavailable, name under which the limited p	partnership propos	ses to register or transact business	PH 3: LL
(State of Formation) 5. C T CORPORATION SYSTEM (Name of Registered Agent for Service of Process) c/o C T Corporation System 6. 1200 South Pine Island Road (Street Address of Registered Office) Plantation (City) 7. Acceptance by the Registered Agent for Service of Process. C T CORPORATION SYSTEM SPECIAL ASSISTANT SECRETARY (Agent mest sign on this line) 111 East Wayne Street, Suite 500 8. Fort Wayne, Indiana 46802 (Address of registered office required in state of formation or, if not required, address of principal office.) 9. NAMES OF GENERAL PARTNERS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802	2 Indiana	4	7 1000	=
5. C T CORPORATION SYSTEM (Name of Registered Agent for Service of Process) c/o C T Corporation System 6. 1200 South Pine Island Road (Street Address of Registered Office) Plantation (City) 7. Acceptance by the Registered Agent for Service of Process. C T CORPORATION SYSTEM NNIE BRYAN SPECIAL ASSISTANT SECRETARY (Agent must sign on this line) 111 East Wayne Street, Suite 500 8. Fort Wayne, Indiana 46802 (Address of registered office required in state of formation or, if not required, address of principal office.) 9. NAMES OF GENERAL PARTNERS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802	/State of Formation)	4		
(Name of Registered Agent for Service of Process) c/o C T Corporation System 1200 South Pine Island Road (Street Address of Registered Office) Plantation (City) 7. Acceptance by the Registered Agent for Service of Process. C T CORPORATION SYSTEM NNIE BRYAN SPECIAL ASSISTANT SECRETARY (Agent must sign on this line) 111 East Wayne Street, Suite 500 8. Fort Wayne, Indiana 46802 (Address of registered office required in state of formation or, if not required, address of principal office.) 9. NAMES OF GENERAL PARTNERS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802 111 East Wayne Street, Suite 500	(State of Formation)		(Date of Formation)	
Plantation , Florida 33324 (City) (Zip Code) 7. Acceptance by the Registered Agent for Service of Process. C T CORPORATION SYSTEM ONNIE BRYAN SPECIAL ASSISTANT SECRETARY (Agent mest sign on this line) 111 East Wayne Street, Suite 500 8. Fort Wayne, Indiana 46802 (Address of registered office required in state of formation or, if not required, address of principal office.) 9. NAMES OF GENERAL PARTNERS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802	(Name of Registered Agent for Service c/o C T Corporation System 6. 1200 South Pine Island Road			
7. Acceptance by the Registered Agent for Service of Process. C T CORPORATION SYSTEM SPECIAL ASSISTANT SPECIAL ASSISTAN	_			
(Agent mest sign on this line) 111 East Wayne Street, Suite 500 8. Fort Wayne, Indiana 46802 (Address of registered office required in state of formation or, if not required, address of principal office.) 9. NAMES OF GENERAL PARTNERS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802 111 East Wayne Street, Suite 500	(City)	(Zip Code)	_	-
(Agent mest sign on this line) 111 East Wayne Street, Suite 500 8. Fort Wayne, Indiana 46802 (Address of registered office required in state of formation or, if not required, address of principal office.) 9. NAMES OF GENERAL PARTNERS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802 111 East Wayne Street, Suite 500	7. Acceptance by the Registered Agent for S C T CORPORATION SYSTEM ONNIE B Company Barry SPECIAL AS	Service of Proce IRYAN SISTANT SECRE	ess.	
8. Fort Wayne, Indiana 46802 (Address of registered office required in state of formation or, if not required, address of principal office.) 9. NAMES OF GENERAL PARTNERS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802 111 East Wayne Street, Suite 500	(Agent must sign on this line)		77 N 1	
9. NAMES OF GENERAL PARTNERS ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802 111 East Wayne Street, Suite 500	111 East Wayne Street, Suite 500 8. Fort Wayne, Indiana 46802		<u></u>	-
ONECO, INC., an Indiana corporation 111 East Wayne Street, Suite 500 Fort Wayne, Indiana 46802 111 East Wayne Street, Suite 500	(Address of registered office required in state of form	ation or, if not req	uired, address of principal office.)	
Fort Wayne, Indiana 46802 111 East Wayne Street, Suite 500	9. NAMES OF GENERAL PARTNERS		SPECIFIC ADDRESS	
Fort Wayne, Indiana 46802 111 East Wayne Street, Suite 500	ONECO, INC., an Indiana corporation		lll East Wayne Street, S	Suite, 500
111 East Wayne Street, Suite 500		-		
		F-4		
				:

(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.
111 East Wayne Street, Suite 500 12. Fort Wayne, Indiana 46802 (Mailing Address of Limited Partnership)
This 8th day of January , 19 98 ONECO, INC., an Indiana corporation General Partner George B. Huber, President
STATE OF INDIANA
COUNTY OF ALLEN
THE FOREGOING instrument was acknowledged and sworn to before me this8thday
ofJanuary, 1998,XXXXXX_, byGEORGE B. HUBER, President of*of (Name of General Partner)
OL Holdings, Limited Partnership , an Indiana
(Name of Limited Partnership)
Limited Partnership, on behalf of Limited Partnership.
Xulia E. Harber
Notary Public
A resident of County, Indiana. County, Indiana. County of Alex County IN
A resident of

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME the undersigned personally appeared GEORGE B. HUBER, President of Oneco, in Indiana corporation, as General Partner of OL HOLDINGS, LIMITED PARTNERSHIP, and Indiana limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

- 1. The amount of capital contributions of the limited partners is \$990.00.
- 2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$990.00.

This 8th day of January, 1998.

FURTHER AFFIANT SAYETH NOT.

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

GEORGE B. HUBER, President of Oneco, Inc., an Indiana corporation

STATE OF INDIANA

COUNTY OF ALLEN

Date: January 8, 1998

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgements in and for the State and County set forth above, personally appeared GEORGE B. HUBER, known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as President of Oneco, Inc., an Indiana corporation, as General Partner of OL Holdings, Limited Partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 8th day of January, 1998.

Julia E Harber Notary Public Resident of Allen County, IN My Commission Exp 10/22/2001