CAPITAL CONNECTION, INC. Art of Inc. File 1002450 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 Status\_ Certificate of Fictitious Name\_ Corp Record Search Officer Search\_ Fictitious Search\_ Fictitious Owner Search\_ Signature Vehicle Search\_ Driving Record\_ UCC 1 or 3 File\_ Requested by: UCC\_11 Search\_ UCC 11 Retrieval\_ Will Pick Up Courier\_ Walk-In



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 18, 1998

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: PAR FAMILY LIMITED PARTNERSHIP

Ref. Number: W98000006080

We have received your document for PAR FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$148.75. However, the document has not been filed and is being retained in this office for the following:

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.

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) 487-6020.

Tammi Cline Document Specialist

Letter Number: 498A00014685

## Sandra B. Mortham, Secretary of State

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

	(Name of limited partnership as it is in the home state;	<del></del>		
	•			
2	•			
(lf	name is unavailable, name under which the limited partnership proposes orda; must contain the word "LIMITED" or "LTD.")	to register or transact l	ousines	ni ea
3.		ember 17, 1997		
	(State of Formation)	(Date of Formation)	ب	<u> </u>
E	Micheal W. Parrillo	•	∞ <u>∓</u>	<b>一</b>
ວ.	(Name of Registered Agent for Service of Process)	•	98 MAR 20	DIVISION OF
	2000 NE 162wd Chroat		.20	. F.
6.			T	CORPORATIONS
	(Street Address of Registered Office)			RA1
	North Miami Beach 33160		57	2
	(City) (Zip Code)			တ
7.	Acceptance by the Registered Agent for Service of Proces	_		
٠.	Manufactured Agent for Service of Process	S.		
	MUMMIN SIMIL			
	(Agent must sign on this line)			
	815 West Van Buren, Suite 400, Chicago, IL 60607			
8	The state of the s			
8. <i>()</i>	Address of registered office required in state of formation or, if not require	ed, address of principal o	ffice.)	
U	Address of registered office required in state of formation or, if not requir			
U	Address of registered office required in state of formation or, if not require NAMES OF GENERAL PARTNERS	SPECIFIC ADDE		
U	Address of registered office required in state of formation or, if not requir	SPECIFIC ADDE		
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U	Address of registered office required in state of formation or, if not require NAMES OF GENERAL PARTNERS	SPECIFIC ADDE		
U	Address of registered office required in state of formation or, if not required NAMES OF GENERAL PARTNERS  Intracoastal, Inc., 815 West Van Buren, Suite 400,	SPECIFIC ADDI		

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. 815 West VanBuren, Suite 400, Chicago, IL 6	
(Mailing Address of Limited Partnershi	·
Thisday of	SECRETARY OF STATE SECRETARY OF CORPORATION OF CORPORATION 11: 57
STATE OF SCINDIS	
COUNTY OF COOK	
THE FOREGOING instrument was acknowledged and stop of March 19 98 by Intrad	
of March , 19 98 , by Intrac	Coastal, Inc. of (Name of General Partner)
Par Family Limited Partnership	.an Illinois
(Name of Limited Partnership)	
Limited Partnership, on behalf of Illinois	-
Limited Partnership. (State or Country)	<del></del>
Notary Public	
State of CINDIS NOTARY	BRIAN PIERCE PUBLIC, STATE OF ILLINOIS
(SEAL) My Commission Expires	MISSION/EXPIRES 5/4/2000 }

State of ILUINOIS

\_\_\_ at Large

My commission expires: 5 /

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS

DEPONE WIE CHE Undersigned personally appeared MICHEAL PARRITTO	, a general
partner of PAR FAMILY LIMITED PARINERSHIP, a (an) ILLINOIS	_limited partnership,
hereinafter referred to as the "Partnership", who certifies as follows:	
	<del></del>
# The amount of the 12 has a large and the 12 has a large and 1 000 00	•
1. The amount of capital contributions of the limited partners is \$ 1,000.00	
2. The anticipated amount of the capital contributions of the limited partner allocated for the purposes of transacting business in Florida is $$1,000$ .	ers that are 00
This 17th day of mach, 1998	٠.
FURTHER AFFIANT SAYETH NOT.	ы ў. 98
Under penalties of perjury I declare that I have read the foregoing and kno thereof and that the facts stated herein are true and correct.	w the contents of CC
Michael Danth	ED STAIL OF
General Partner	TE Flows 57
State of Illinois	<b>.</b>
County of Cook	-
Date 31,718	
BEFORE ME, the undersigned officer, a Notary Public authorized to administrate acknowledgments in and for the State and County set forth above, per the set forth above, per the set for the set forth above, per the person who executed the foregoing Affidavit of Capital Contributions, a set for and before me that he executed this Affidavit as General Particular.	rsonally appeared own by me to be
N WITNESS WHEREOF I have hereunto set my hand and affixed my official and County aforesaid, this day of	seal, in the State
"OFFICIAL SEAL"  J. BRIAN/PIERCE  NOTARY PUBLIC, STATE OF ILLINOIS  MY COMMISSION EXPIRES 5/1/2000	<b></b> 
Seal	