

*File 2nd*  
**B98000000306**

**FILING COVER SHEET**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
58 MAY 14 PM 12:36

REFERENCE: 0171.2495

DATE: 5-14-98

CONTACT: CINDY HICKS

FROM: CORPORATE & CRIMINAL RESEARCH SERVICES

103 N. MERIDIAN STREET

TALLAHASSEE, FL 32301

900002523179  
-05/14/98-01042-006  
\*\*\*\*406.00 \*\*\*\*406.00

TELEPHONE: 222-1173

SUBJECT: Elcoo Associates Limited  
Partnership

STATE FEES PREPAID WITH CHECK # 3109 FOR \$ 406.00

PLEASE FILE:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INC.         | <input type="checkbox"/> AMENDMENT                      | <input type="checkbox"/> DISSOLUTION   |
| <input type="checkbox"/> ANNUAL REPORT            | <input type="checkbox"/> MERGER                         | <input type="checkbox"/> WITHDRAWAL    |
| <input checked="" type="checkbox"/> QUALIFICATION | <input checked="" type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> ANNUAL REPORT |
| <input type="checkbox"/> FICTITIOUS NAME          | <input type="checkbox"/> LIMITED LIABILITY              | <input type="checkbox"/> REINSTATEMENT |
| <input type="checkbox"/> TRADEMARK/SERVICE        | <input type="checkbox"/> UCC-1                          | <input type="checkbox"/> UCC-3         |

*MyC 5/14/98*  
RECEIVED  
58 MAY 14 AM 10:33  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

PROVIDE US WITH:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF STATUS | <input checked="" type="checkbox"/> STAMPED COPY |
|---|--|--|

Examiner's Initials

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

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

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
MAY 14 PM 12:36

1. 8600 Associates Limited Partnership  
(Name of limited partnership as it is in the home state)

2. (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. Michigan (State of Formation) 4. May 13, 1985 (Date of Formation)

5. Alan H. Daniels  
(Name of Registered Agent for Service of Process)

6. 800 North Magnolia Avenue, Suite 1500  
(Street Address of Registered Office)

Orlando, Florida 32803  
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process.  
(Agent must sign on this line)

8. 6735 Telegraph Road, Suite 110, Bloomfield Hills, MI 48301  
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS	STREET ADDRESS
8600 Corporation	6735 Telegraph Road, Suite 110
A Michigan Corporation	Bloomfield Hills, MI 48301

F98.000602750

10. 6735 Telegraph Road, Suite 110, Bloomfield Hills, MI 48301  
(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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 MAY 14 PM 12:36

12. 6735 Telegraph Road, Suite 110  
Bloomfield Hills, Michigan 48301

(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 12<sup>th</sup>, May, 1998

8600 Corporation  
A Michigan Corporation

By: [Signature]  
General Partner  
Tom J. Goldberg, President

STATE OF MICHIGAN

COUNTY OF OAKLAND

On this 12<sup>th</sup> day of May, 1998, Tom J. Goldberg

personally appeared before me,  who is personally known to me  
 whose identity I proved on the basis of \_\_\_\_\_

[Signature]  
(Notary Public Signature)

\_\_\_\_\_  
(Notary's Printed Name)

Seal

My Commission Expires: \_\_\_\_\_

LEON M. SCHURGIN  
Notary Public, Oakland County, MI  
My Commission Expires July 14, 1999

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 MAY 14  
PH12:36

BEFORE ME the undersigned personally appeared Tom J. Goldberg, President  
8600 Corporation, a Michigan Corporation,  
a general partner of 8600 Associates/, a (an) Michigan limited partnership  
Limited Partnership  
hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 501,000.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 53,000.00.

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 12<sup>th</sup> day of May, 19 98.

8600 CORPORATION  
A Michigan Corporation

[Signature]  
General Partner  
By: Tom J. Goldberg, President

STATE OF MICHIGAN  
COUNTY OF OAKLAND

On this 12<sup>th</sup> day of May, 19 98, Tom J. Goldberg

personally appeared before me,  who is personally known to me  
 whose identity I proved on the basis of \_\_\_\_\_

LEON M. SCHURGIN  
Notary Public, Oakland County, MI  
My Commission Expires July 14, 1999

[Signature]  
(Notary Public Signature)

\_\_\_\_\_  
(Notary's Printed Name)

Seal

My Commission Expires: \_\_\_\_\_