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FOWLER, BARICE, FEENEY & O'QUINN

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TELEPHONE: (407) 425-2684 TELEFAX: (407) 425-2690

July 16, 1998

VIA FEDERAL EXPRESS

Secretary of State of Florida Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Re:

Application by Foreign Limited Partnership for Authorization to Transact Business in Florida/auG TWO, Ltd.

Dear Sir/Madam:

Enclosed herewith please find auG TWO, Ltd.'s Application by Foreign Limited Partnership for Authorization to Transact Business in Florida. Please also find enclosed our firm's check in the total amount of \$96.25, representing \$52.50 for filing fees, \$35.00 for designation of registered agent and \$8.75 for certificate under seal.

Please do not hesitate to contact the undersigned directly with questions or comments.

Sincerely,

Best regards.

W. P. Verifyer

FOWLER, BARICE, FEENEY & O'QUINN, Name 7/20/98 Availability dcs Document ámes A. Dozier, Paralegal نادانا Examinar -nn ಗಿರಿಸ್ತರ್ಷ ಆ, Enclosure (Jodaier DCC Verifyer DCC Acknowledgement SIFORMSICORPISE CSTATE DOC

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

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

. aug TWO, L.P. (Name of limited partnership a	· 's 's to the harmo state	<u></u>		
(Name of limited partnership a	s it is in the nome state	;)		
2. auG TWO, Ltd. (If name is unavailable, name under which the limited part		<u> </u>	. 1	-
(If name is unavailable, name under which the limited particular in the word Florida; must contain the word	tnership proposes to reg "LIMITED" or "LTD."	gister or transac)	i business in	
3. Illinois 4 1 (State of Formation) (I	0/14/97 Date of Formation)			-
5. <u>Michael A. U. O'Ouinn</u> (Name of Registered Agent for Service	e of Process)	-	98 . SECR TALLA	
6. 28 West Central Boulevard, For (Street Address of Re	eistered Office)		JUL 17	FILED
Orlando (City)	, Florida 32	(Zip Code)	PN 2: 05	ΞD
7. Acceptance by the Registered Agent for Service of Process			D	
(Agent must sign of	on this line)			
8. 919 North Michigan Avenue, Suit				
Chicago, Illinois 60611				
(Address of registered office required in state of format	ion or, if not required.	address of princ	ipal office.)	
9. NAMES OF GENERAL PARTNERS	STREE	T ADDRESS		
Titan Development Company	919 N. Mi Chicago,	ichigan A Illinois	ve, Suit 60611	:e 55
F97000004758				
		-		

- 10. 919 North Michigan Avenue, Suite 550, Chicago, Illinois 60611 (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 canceled or withdrawn.

12. 919 North Mich	<u>ligan Avenue, s</u>	uice 550		
Chicago, Illir				
	(Mailing Address of l	•		
Under penalties of perjury I, bein thereof and that the facts stated I	ng duly sworn, declare tha herein are true and correct	I have read the foreg	oing and know the	contents
This 4 day of	Juna		98	
1170	y Dend	o pmont	ط تسدی	Huy
() ca	y General	Partner	ie seclut	
STATE OF Illenoi	<u>v</u>			
Cont	'		Ā	SE 28
COUNTY OF COM	-			
On thisda	y of Jane			
10 -	0			
<u>Alan</u>	Tampro	per	sonally appeared S	refore me
who is personally known to	me		UA	를
whose identity I proved on t	ne basis oi			
	4 @	7		
	(Notary Public Sig	fallisey		
\mathcal{O}		V		
	TANICE A. (Notary's Printed N	HALLISEY		

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared	Dean Lampros, Titan Development	President of Company
a general partner of aug TWO, L.P.		Illinois
limited partnership, hereinafter referred to as the "P		: :
1. The amount of capital contributions of the limite	ed partners is \$	lanated for the numbers of
2. The anticipated amount of the capital contributio transacting business in Florida is \$ 5,000.0		ocated for the purposes of
Under the penalties of perjury I, being duly sworn,	declare that I have read the foregoi	ng and know the contents thereof and
that the facts stated herein are true and correct.	<u></u>	
This 4 day of <u> </u>	. 19 98	-
117AM De	mus Pres	company by
Dean Can	nous Pres	ide 8
<u> </u>	General Partner	AH,
STATE OF Illenia	_	ART ART SSEE
COUNTY OF COM		
On this 4th day of	June	19 3 20
on misauty or		
<u>Dean Jan</u>	personally app	peared before me.
who is personally known to me	·	
whose identity I proved on the basis of		
		-
Juice a. Hallisy	<u> </u>	
(Notary Public Signature)	·	
JANICE A. HALLISO	5.X	
(Notary's Printed Name)		
		~~3

Seal

My Commission ExPIRE CIAL SEAL

JANICE A HALLISEY

NOTARY PUBLIC, STATE OF ILLINOIS

MY COMMISSION EXPIRES: 11/17/99