

698000000503

Document Number Only

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUL 31 PM 3:00

C T CORPORATION SYSTEM

Requestor's Name
660 East Jefferson Street

Address
Tallahassee, Florida 32301

City State Zip Phone
904-222-1092

CORPORATION(S) NAME

700002604647-7
-07/31/98--01102--004
***1793.75 ***1793.75

00789-00611-00671

CROWN INVESTMENT, Limited Partnership.

- | | | |
|---|---|---|
| ☐ Profit | ☐ Amendment | ☐ Merger |
| ☐ NonProfit | ☐ Dissolution/Withdrawal | ☐ Mark |
| ☐ Limited Liability Company | ☐ Annual Report | ☐ Other |
| ☒ Foreign | ☐ Reservation | ☐ Change of P.A. |
| ☒ Limited Partnership | ☐ Photo Copies | ☐ Fictitious Name |
| ☐ Reinstatement | ☐ Call When Ready | ☒ CUS/G/S |
| ☐ Certified Copy | ☐ Call if Problem | ☐ Afternoon |
| ☐ Walk In | ☐ Will Wait | ☐ Pick Up |
| ☐ Mail Out | | |

B98-503

Name Availability	MTH
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PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

Please call Jeff Butterfield
if any problems/questions.

THANKS!

7/31
File Second



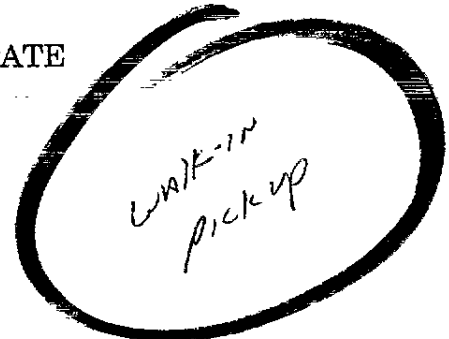
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 7, 1998

CT CORPORATION

TALLAHASSEE, FL

SUBJECT: CROWNE INVESTMENTS, LIMITED PARTNERSHIP
Ref. Number: W98000017461



We have received your document for CROWNE INVESTMENTS, LIMITED PARTNERSHIP and your check(s) totaling \$1793.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

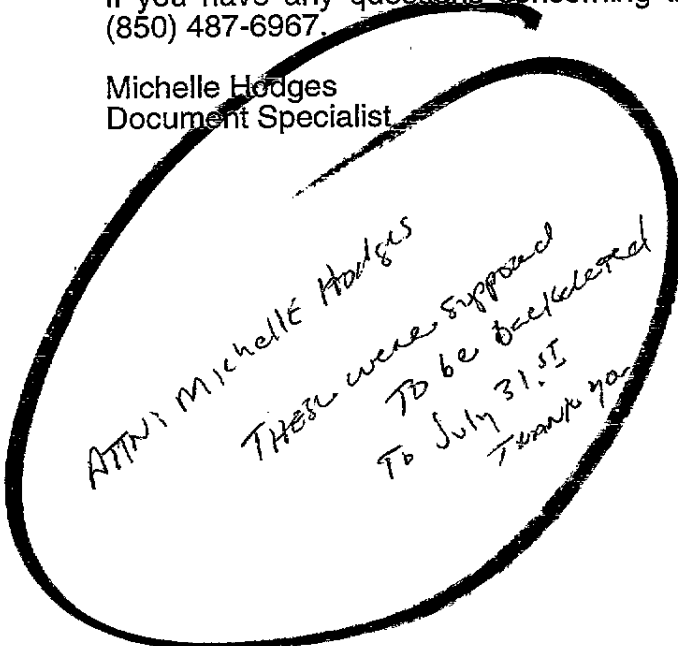
The registered agent must sign accepting the designation.

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) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 598A00041369



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DIVISION OF CORPORATIONS

Florida Department of State, Sandra B. Mortham, Secretary of State
**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. Crowne Investments, Limited Partnership
(Name of limited partnership as it is in the home state)
2. Alabama Crowne Investments, Limited Partnership
(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. Alabama 4. July 29, 1998
(State of Formation) (Date of Formation)
5. C T CORPORATION SYSTEM
(Name of Registered Agent for Service of Process)
6. 1200 South Pine Island Road
(Street Address of Registered Office)
- Plantation, Florida 33324
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process.

Connie Bryan **CONNIE BRYAN**
C T CORPORATION SYSTEM
(Officer must sign on this line)

8. 1015 Financial Center, Birmingham, AL 35203
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAME OF GENERAL PARTNERS	STREET ADDRESS
<u>Crowne Investments, LLC</u>	<u>1015 Financial Center</u>
<u>MA8-854</u>	<u>Birmingham, AL 35203</u>

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10. 1015 Financial Center, Birmingham, AL 35203
(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.

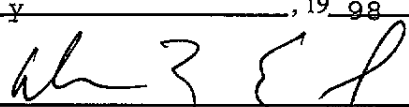
CONTINUED

12. 1015 Financial Center, Birmingham, AL 35203

(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 29th day of July, 19 98.



General Partner
Crowne Investments, LLC

STATE OF Alabama

COUNTY OF Jefferson

On this 29th day of July, 19 98.

Crowne Investments, LLC personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____



(Notary Public Signature)

Jennifer Carlson

(Notary's Printed Name)

Seal

My Commission Expires: March 12, 2001

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED
PARTNERSHIP**

BEFORE ME, the undersigned, personally appeared Alan Z. Engel, member of Crowne Investments, LLC,
a general partner of Crowne Investments, Limited Partnership, a(an) Alabama
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 982,000.00
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of
transacting business in Florida is \$ 460,000.00

*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 29th day of July, 19 98



General Partner

STATE OF Alabama

COUNTY OF Jefferson

On this 29th day of July, 19 98,

_____ personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____



(Notary Public Signature)

Jennifer Carlson

(Notary's Printed Name)

Seal

My Commission Expires: March 12, 2001

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