1399000000373

CAPITOL SERVICES d/b/a PARALEGAL & ATTORNEY SERVICE BUREAU, INC.	
(Requestor's Name)	
1406 Hays Street, Suite 2 . (Address)	
Tallahassee, FL 32301 (904) 656-3992	OFFICE USE ONLY
(City, State, Zip) (Phone #)	

200003013402--5 -10/13/93--01018--017 ****140.00 ****140.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. JAmpa 7	Avenue Warehow ration Name)	Se, L.P. (Document#)	
2. (Согра	ration Name)	(Document #)	
3. (Corpo	ration Name)	(Document #)	39 0C
	ration Name)	(Document #)	7 T O
Walk in	Pick up time 1013	Certified Copy	변화되는 그로
Mail out	Will wait Photocopy	Certificate of Status	AM II: 06
NEW FILINGS	AMENDMENTS		
Profit	Amendment		پ کیا
NonProfit	Resignation of R.A., Office	cer/Director	95000 990CT
Limited Liability	Change of Registered Age	ent	7 3 3
Domestication	Dissolution/Withdrawal		ر الله الله الله الله الله الله الله الل
Other	Merger		
OTHER FILINGS	REGISTRATION/	TO THE ETHAL CANAGE TO THE STATE OF THE STAT	RATION:
Annual Report	QUALIFICATION	13.1	S
Fictitious Name	Foreign Limited Partnership		
Name Reservation	Reinstatement	10/13	5/99
	Trademark		

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

Gampa 7th Assonue Wareho	use T. P	- W - F. S. S.
Tampa 7th Avenue Wareho (Name of limited partners	hip as it is in the home state)	3 95
name is unavailable, name under which the limited pa must contain the word	rtnership proposes to register or transact but "LIMITED" or "LTD.")	siness in Florida; 😘 📆
Delaware 4. (State of Formation)	9/23/99 (Date of Formation)	
NRAI Services, Inc.		The second secon
(Name of Registered Agent for S	ervice of Process)	
526 East Park Avenue		-
(Street Address	of Registered Office)	
allahassee	, Florida 32301	, , , , , , , , , , , , , , , , , , ,
(City)	(Zip Code)	
Acceptance by the Registered Agent for Service of Pr	rocess:	
12 -11 -1	· · · · · · · · · · · · · · · · · · ·	
(Agent must	xign on this line)	, Assistant Sec [†] y
9 East Loockerman Street		
Dover, DE 19901 (Address of registered office required in state of I	ormation or, if not required, address of prin	cipal office.)
NAMES OF CENERAL PARTNERS	STREET ADDRESS	
Tampa HOldings II_Corp.	155 East 55th Str	ceet, NY, NY 10022
F990000005271	- -	

10. ____ 155 East 55th Street, New York, NY 10022

(Office where Names, Addresses and Contributions of Limited Partners are kept.)

^{11.} The limited partnership will undertake to keep the records risting 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. 155 East 55th Street, New York, N.Y. 19022
(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.
Signed thus 8th day of October 19 99
STATE OF New York By: David Sachs, President
COUNTY OF New York
On this St day of October . 1999
David Sachs personally appeared before me,
who is personally known to me
whose identity I proved on the basis of
Martha Lister Intriago (Notary Public Signature)

MARTHA PINON-INTRIAGO
Notary Public, State of New York
No. 41-4995659
Qualified in Queens County
Commission Expires April 27,

Scal

My Commission Expires:

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned pers	onally appeared David	Sachs		 -
a general partner of Tampa	7th Avenue Wareho	ouse LP*(an)D	elaware	. .
limited partnership, hereinafter refe				٠٠ ١ ٠
1. The amount of capital contribut	ions of the limited partners is \$			-2-1
2. The anticipated amount of the c	apital contributions of the limi	ted partners that are alloca	ited for the purposes	of
transacting business in Florida is	s <u>0</u>			
Under the penalties of perjury 1, b	oino duty sworn, declare that l	have read the foregoing	and know the conten	ts thereof und
that the facts stated herein are true				9 3
Signed this State day of 0		99		99 OCT 13
Ву	MPA HOLDINGS TI	Du b	PARTNER	PM 1: 23
COUNTY OF NEW YORK				•
On this87 (day of Octo	ber	. 19 99	
David Sachs		personally appo	ared before me,	
who is personally known to	me			
whose identity I proved on t	he basis of			

Matka Linda (Notary Public Signatu	fitiage_			
MARTHA PINO. (Notary's Printed Name	N-INTRIÀOE	MARTHA PINON-IN Notary Public, State o	f New York	
Seal	My Commission Expires	No. 41-49956 Qualified in Queen: Commission Expires Ap	s County ril 27, <u>00</u>	