## Requestor's Name

| Requestor's Name     |  |  |
|----------------------|--|--|
| 660 E. Jefferson St. |  |  |
| Address              |  |  |
| Tallahassee, FL 3230 | 01 850-222-2785                                  |  |
| City/St/Zip          | Phone #  |  |
| •                    |  |  |
|                      |  |  |
| 000000470444         |  |  |
| CORPORATION NAM      | IE(S) & DOCUMENT NUMBER(S                        | S), (if known):  |
| 1- DAVIS FAMILY      | PARTNERS, LTD.                                   |  |
|                      |  |  |
| 2-                   |  | 99 DEC 14 PM 5: 09  Certified Copy   |
| 3-                   |  |  |
|                      |  | F 025.   |
| 4                    |  | P P  |
|                      |  | å S  |
| X Walk-in            | Pick-up time ASAP                                | Certified Copy 9   |
| Mail-out             |  | Le r   |
| Iviali-out           | Will wait Photocopy                              | Certificate of Status  |
|                      |  |  |
| NEW FILINGS X Profit | AMENDMENTS                                       |  |
| Non-Profit           | Amendment  Resignation of R.A., Officer/Director | <b></b> 700003072067S  |
| Limited Liability    | Change of Registered Agent                       | 7000030720675<br>-12/16/9901002018<br>*****96.25 *****96.25  |
| Domestication        | Dissolution/Withdrawal                           | **************************************   |
| Other                | Merger   |  |
| OTHER FILINGS        | REGISTRATION/QUALIFICATION                       |  |
| Annual Report        | XX Foreign                                       |  |
| Fictitious Name      | Limited Partnership                              |  |
| Name Reservation     | Reinstatement                                    |  |
|                      | Trademark  | 1  |
|                      | Other  |  |
|                      |  | A STATE OF THE STA |
|                      | 1  | Q  |
|                      | 1011   |  |
|                      | 12/14/99 [                                       | Examiner's Initials  |
|                      | 1-117119   |  |
|                      | <i>i</i> , (                                     |  |

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

| 1. DAVIS FAMILY PARTNERS, LTD.   | -   |
|--|---|
| (Name of limited partnership as it is  | s in the home state)  |
| 2. ROBERT B. DAVIS FAMILY PARTNERS, L'   | rd.   |
| 2. ROBERT B. DAVIS FAMILY PARTNERS, L'<br>(If name is unavailable, name under which the limited partnership p<br>must contain the word "LIMITE | proposes to register or transact business in Raid<br>ED" or "LTD.") |
| 3. KENTUCKY  (State of Formation)  (Date of Formation)   | , 1999  |
| (State of Formation) (Date of  | of Formation)   |
| 5. MELISSA DAVIS   |   |
| (Name of Registered Agent for Service of P   | rocess)   |
| 6. 16465 CAPTIVA DRIVE   |   |
| (Street Address of Register  | red Office)   |
| CAPTIVA  | , Florida 33924 (Zip Code)  |
| (City)   | (Zip Code)  |
| 7. Acceptance by the Registered Agent for Service of Process:  |   |
| x Melissa January (Agent must sign on this   | s line)   |
| 3 3010 FAWN LANE   |   |
| FLATWOODS, KY 41139  |   |
| (Address of registered office required in state of formation or  | r, if not required, address of principal office.)                   |
| 9. NAMES OF GENERAL PARTNERS   | STREET ADDRESS  |
|  | 3010 FAWN LANE  |
| ROBERT B. DAVIS  | FLATWOODS, KY 41139   |
|  | 2040 HALINI TANID   |
|  | 3010 FAWN LANE  |

## 10. DAVIS FAMILY PARTNERS, LTD., 3010 FAWN LANE, FLATWOODS, KY 41139

(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.

JOHN L. ACKMAN, JR.

(Notary's Printed Name)

8-10-2000

Seal

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

## 'AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

| BEFORE ME the undersigned personally appeared ROBERT B. DAVIS  |
|--|
| a general partner of DAVIS FAMILY PARTNERS, LTD. , a (an) KENTUCKY   |
| limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:   |
| 1. The amount of capital contributions of the limited partners is \$ 0.00  |
| 2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$_0.00 |
| <b>.</b>   |
| 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.   |
| Signed this 14th day of December, 1999.  |
| General Partner  |
| General Father   |
| STATE OF KENTUCKY  |
| COUNTY OF JEFFERSON  |
| On this 14th day of December, 1999,  |
| ROBERT B. DAVIS, personally appeared before me,  |
| who is personally known to me  |
| whose identity I proved on the basis of  |
|  |
|  |
| (Notary Public Signature)  |
| (Notary Public Signature)  |
| JOHN L. ACKMAN, JR.  (Notary's Printed Name)   |

My Commission Expires: 8-10-2000

Seal