

B99000000453

ATTORNEYS TITLE

Requestor's Name

660 E. Jefferson St.

Address

Tallahassee, FL 32301

City/St/Zip

850-222-2785

Phone #

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

1- DAVIS FAMILY PARTNERS, LTD.

2- _____

3- _____

4- _____

FILED STATE
SECRETARY OF CORPORATIONS
99 DEC 14 PM 5:09

Walk-in

Pick-up time ASAP

Certified Copy

Mail-out

Will wait

Photocopy

Certificate of Status

NEW FILINGS

<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

700003072067-9

-12/16/99-01002-018

*****96.25 *****96.25

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

12/14/99

Examiner's Initials

SECRETARY OF CORPORATIONS
TALLAHASSEE, FLORIDA
99 DEC 14 PM 5:09

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

FILED STATE
CORPORATIONS
DEPT. OF REVENUE
JUL 14 PM 5:09

1. DAVIS FAMILY PARTNERS, LTD.
(Name of limited partnership as it is in the home state)

2. ROBERT B. DAVIS FAMILY PARTNERS, LTD.
(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. KENTUCKY 4. JULY 19, 1999
(State of Formation) (Date of Formation)

5. MELISSA DAVIS
(Name of Registered Agent for Service of Process)

6. 16465 CAPTIVA DRIVE
(Street Address of Registered Office)

CAPTIVA, Florida 33924
(City) (Zip Code)

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

x Melissa Davis
(Agent must sign on this line)

8. 3010 FAWN LANE
FLATWOODS, KY 41139
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS	STREET ADDRESS
<u>ROBERT B. DAVIS</u>	<u>3010 FAWN LANE</u> <u>FLATWOODS, KY 41139</u>
<u>MELISSA DAVIS</u>	<u>3010 FAWN LANE</u> <u>FLATWOODS, KY 41139</u>

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.

CONTINUED

12. 3010 FAWN LANE

FLATWOODS, KY 41139

(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 this 14th day of December, 19 99

Robert B. Davis
General Partner

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 DEC 14 PM 5:09

STATE OF KENTUCKY

COUNTY OF JEFFERSON

On this 14th day of December, 19 99

ROBERT B. DAVIS personally appeared before me,

who is personally known to me

whose identity I proved on the basis of

John L. Ackman, Jr.

(Notary Public Signature)

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 (X) KENTUCKY
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

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DIVISION OF CORPORATIONS
99 DEC 14 PM 5:09

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 .

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, 19 99 .

Robert B. Davis
General Partner

STATE OF KENTUCKY
COUNTY OF JEFFERSON

On this 14th day of December, 19 99 .

ROBERT B. DAVIS, personally appeared before me,

who is personally known to me

whose identity I proved on the basis of _____

John L. Ackman, Jr.
(Notary Public Signature)

JOHN L. ACKMAN, JR.
(Notary's Printed Name)

Seal

My Commission Expires: 8-10-2000