CERTII G. V 66-68, 66-69	FICATE OF PAR	TNERSHIP OR B	Business	UNDER ASSUMEI	NAME BO	pp. Bo
STATE OF NORTH C			33	BUSINESS UND)f Partnershi)er assumed n	NAME
Each of the under	signed hereby cer	tifies that he prop	oses to en	gage in a business in	Forsyth County,	N. C.,
p. 0. Bo				Winston-Salem,	North Carolina	<u>2710</u> 2
(Street and N and files the following G.S. :66-68:				rsyth County, pursu	ant to the provision	ons of
	nder which said l S F Partners	ousiness is to be c	onducted i	s		
2. The name a	and address of ea	ch owner is				
J.	Frank	Morris	112 B	randon Place, Wir		<u>271</u> 04
(First Name) James	(Middle Name) L.,	(Last Name) Morris	225_L	(Residence Address) akeway Drive, Lev		7023
(First Name)	(Middle Name)	(Last Name)		(Residence Address)		
(First Name)	(Middle Name)	(Last Name)		(Residence Address)		
(First Name)	(Middle Name)	(Last Name)		(Residence Address)		
(First Name)	(Middle Name)	(Last Name)		(Residence Address))	
(Name of Corporation	3E)		<u> </u>	(Home Office Addre	:38)	
Signed:). FRANK	hank Moni		
			-/2-	~ J //4	*	
		Managht and a second	TAMES	nes X/Uom MORRIS	<u>us</u>	****
ATTEST:		4	James/ L.	MORRIS		
		I I	3y		Preside	ent.
A)	Se	ecretary			11000	
I, Legace F certify that J. I maker S, personally a Notarial Seal	WITNESS OFFICIAL OFFICIAL COUNTY PUBLIC - NO.	this day and acknown hand and officerouse	ris nowledged cial seal, t		the foregoing inst	, the rument.
Notarial Seal COUNTY OF FORSYTH LEGARE H. THACKSTON My Commission Expires Sept. 12, 1983				My commission expi	res <i>9-13-8</i> 8	
STATE OF NORTH						
	. ^	A T) 10	nersonally	came before me, (No	ame of Officer taking acknowledges	wiedgment)
seal of		, and is acquain	CU WIOII	me duly sworn, says		
President of said Cor	poration, and tha	t he, the said			15 0110	•
of the said Corporation	on, and saw the sa	aidPreside	ent sign th	e foregoing or annexe	ed instrument, and	saw the
3.6	Compountion	thread to easid instr	nment by	saidPresid	dent, and that he,	the said
said comming pear or	ante corporation t	cioned his name	in attestat	ion of the execution	of said instrumer	nt in the
(Name of Secretary or A	ssistant Secretary)	signed his hame	m accoun	asid Corneration		
•	presence of	or saidri	egident or	para corboration.		
	WITNESS	s my hand and off	icial seal, t	hisday of	, A.D.,	, 10
Notarial Seal				Notary Public	Clerk of Super	ior Court
				My commission exp	ires	,
		REGI AND I	ENTED FO STRATION RECORDE 12 34 PM	OR V D		
		EUNIO REGISTE	IZ 34 FM CE AYERS ER OF DEI TH CTY. N	; En s		

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