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# Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To: Division of Corporations Fax Number : (850)922-4003 From: Account Name : CARLTON FIELDS Account Number : 076077000355 Phone : (813)223-7000 Fax Number : (813)229-4133

# FLORIDA LIMITED PARTNERSHIP

All American Title Affiliates, Ltd.

Certificate of Status 1 Certified Copy 1 Page Count 02 Estimated Charge \$271.25

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# CERTIFICATE OF LIMITED PARTNERSHIP

THIS CERTIFICATE is made this 16 day of November, 2000, by All American Title Insurance, Inc., a Florida corporation, the sole general partner of All American Title Affiliates, Ltd. (the "Partnership"). The undersigned certifies as follows:

1. The name of the limited partnership is All American Title Affiliates, Ltd.

2. The address of the office required to be maintained by the Partnership in Florida pursuant to Section 620.105 of the Florida Statutes is 772 W. Lumsden Rd., Brandon, Florida 33511, and the name and address of the agent for service of process is Susan Luther, 772 W. Lumsden Rd., Brandon, Florida 33511.

3. The name of the general partner of the Partnership is All American Title P9500010284 Insurance, Inc., a Florida corporation, and its business address is 772 W. Lumsden Rd., Brandon, Florida 33511.

4. The mailing address of the Partnership is 772 W. Lumsden Rd., Brandon, Florida 33511.

5. The latest date upon which the Partnership is to dissolve is December 31, 2020.

6. This Certificate of Limited Partnership is made in accordance with Section 620.108 of the Florida Statutes.

ALL AMERICAN TITLE INSURANCE, INC., a Florida corporation

By: SULAN: H. U. THEN. Name: Title: 2.11-5. Der-

Prepared by: Paula McDonald Rhodes, Esq. Carlton Fields F. O. Box 3239 Tampa, FL 33601 Florida Bar Number 449598

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#### FAX NG.: 8132294133 AUDIT NO. HUIUUUUUX/53 5

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### AFFIDAVIT

# STATE OF FLORIDA COUNTY OF HILLSBOROUGH

BEFORE ME, the undersigned authority, personally appeared Susan Luther, who, being by me first duly sworn, deposes and says:

1. I am the  $\underline{(2eige > ...)envirt}$  of All American Title Insurance, Inc., a Florida corporation, which is the initial general partner of ALL AMERICAN TITLE AFFILIATES, LTD., a Florida limited partnership (the 'Partnership'), and as such I am duly authorized to execute this affidavit on behalf of the Partnership.

2. The amount of the actual capital contribution of the limited partners of the Partnership is \$16,800, and \$25,000 is the total amount anticipated to be contributed by the limited partners.

3. This affidavit is made in compliance with Section 620.108(1) of the Florida Statutes.

and the second se
SUSAN LUTHER
Sworn to and subscribed before me this $\frac{1}{12}$ day of November, 2000, by Susan Luther as
Parsico of All American Title Insurance, Inc., a Florida corporation,
he sole general partner of All American Title Affiliates, Ltd., a Florida limited partnership, on
chalf of the Partnership. She [picase check as applicable] // is personally known to me, or
(type of identification) as identification,
BARBARAL CAVAGE
The for PAPERES, 1220(2022) (Signature of Notary Public)
(1800) NOTARY FR Autor Services & Hunding Co. Barbara L. Cavalar
(Legibly Printed Name of Nedary Public)
(NOTARY SEAL) Notary Public, State of Florida
CC. 788798
(Commission Number)
12/20/02
(Commission Expiration Date)

AUDIT NO. H0100008753 5