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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

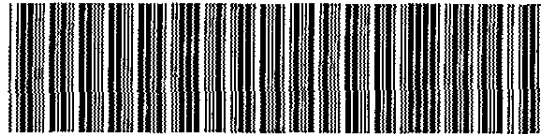
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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3-20-03

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Miller Family Partnership

File 2/2/00

Signature

Requested by:

SW

3/12

Name

Date

Time

Walk-In

Will Pick Up

- ☐ Art of Inc. File
- ☒ LTD Partnership File
- ☐ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☒ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

US APR 19 PM 12:57

APPROVED
AND
FILED

**CERTIFICATE OF LIMITED PARTNERSHIP
OF**

**WESLEY D. MILLER FAMILY PARTNERSHIP, Ltd.
a Florida Limited Partnership**

The undersigned General Partner desiring to form a limited partnership pursuant to Florida Revised Uniform Limited Partnership Act as set forth in Part I, Chapter 620 of the Florida Statutes, hereby states the following:

1. The name of the limited partnership is: **Wesley D. Miller**, Ltd. (the "Partnership"). **Family Partner-ship.**

2. The address of the office of the Partnership is: 3972 N. E. 171 Street, N. Miami, Florida 33160.

3. The name and address of the agent for service of process of the Partnership is: Wesley D. Miller, 3972 N. E. 171 Street, N. Miami, Florida 33160.

4. The name and address of the General Partner is as follows **Wesley D. Miller**, Wesley D. Miller, Incorporator, 3972 N. E. 171 Street, N. Miami, Florida 33160.

Family Corporation

5. The mailing address of the General Partner is as follows: Wesley D. Miller, 3972 N. E. 171 Street, N. Miami, Florida 33160

6. The latest date upon which the Partnership will dissolve is: *see date in agreement.*

7. A conveyance or encumbrance of real property held in the Partnership name, and any other instrument affecting title to real property in which the Partnership has an interest shall be executed in the Partnership name by the General Partner.

The execution of this Certificate by the undersigned General Partner constitutes and affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the General Partner of the **Wesley D. Miller**, Ltd., this 13th day of February, 2003.
Family Partnership

GENERAL PARTNER:



Wesley D. Miller Family Corporati
BY: WESLEY D. MILLER, Incorporator

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ALFRED P. ROSS
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AND
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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared WESLEY D. MILLER, the Incorporator of the WESLEY D. MILLER Family Corporation, a Florida Corporation, the General Partner of the **Wesley D. Miller Family Ltd.**, a Florida Limited Partnership, hereinafter referred to as the "Partnership" who, upon being duly sworn, did certify as follows:

- Partnership**
1. The amount of capital contributions of the General and Limited Partners is attached hereto as Exhibit "A".
 2. The anticipated amount of additional capital contributions of the Limited Partners is none at this time.

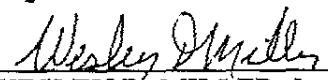
FURTHER AFFIANT SAYETH NAUGHT.

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true, to the best of my knowledge and belief.

Dated this 13th day of February, 2003.

GENERAL PARTNER:

**Wesley D. Miller Family
Cooperation**

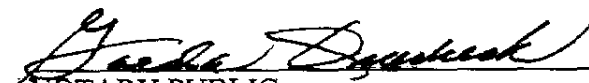

WESLEY D. MILLER, Incorporator

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
AND
NOTED

STATE OF FLORIDA)
)SS:
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 13th day of February, 2003, by WESLEY D. MILLER, Incorporator of The **Wesley D. Miller**, the General Partner of the **Wesley D. Miller Family**, Ltd., who is personally known to me. **Family Corporation Partnership**


NOTARY PUBLIC



Golda Overbeck
MY COMMISSION # DD046487 EXPIRES
August 26, 2005
SCALED THROUGH TROY FARM INSURANCE, INC.

EXHIBIT "A" TO THE AFFIDAVIT OF CAPITAL CONTRIBUTIONS

VALUE

Contributed by **Wesley D. Miller Family Corporation**

Wesley D. Miller, Incorporator

as General Partner,

Cash, real estate and securities

\$73,500.00

Contributed by The Wesley D. Miller Revocable Trust

dated February 13, 2003, Wesley D. Miller, Trustee,

as Limited Partner,

Cash, real estate and securities

\$7,276,500.00

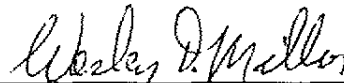
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TALLAHASSEE, FLORIDA

**ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT**

Having been named as registered agent for the **Family Partnership** **Wesley D. Miller** Ltd., a Florida Limited Partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process of said Partnership and to comply with any and all Statutes relative to the complete and proper performance of the duties of Registered Agent.

REGISTERED AGENT

DATED: February 13, 2003


WESLEY D. MILLER

AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA