

A100000000149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

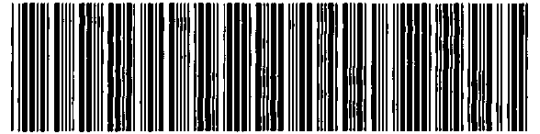
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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W1000000004

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02/04/10--01026--016 \*\*1061.25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 MAR 10 PM 3:29

FILED

D. BRUCE

MAR 11 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 5, 2010

RANDAL C. FAIRBANKS, ESQ.  
113 NATURE WALK PARKWAY, SUITE 103  
ST. AUGUSTINE, FL 32092

SUBJECT: THE J.D.D. FAMILY LIMITED PARTNERSHIP  
Ref. Number: W10000006004

We have received your document for THE J.D.D. FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 210A00003019

10 MAR 10 PM 3:29

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE J.D.D. FAMILY LIMITED PARTNERSHIP  
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Randal C. Fairbanks, Esq.  
Contact Person  
Fairbanks & McGillin, P. L.  
Firm/Company  
113 Nature Walk Parkway, Suite 103  
Address  
St. Augustine, Florida 32092  
City, State and Zip Code

drjdd@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jane Odjakjian at ( 904 ) 687-1140  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
- \$1,008.75 Filing Fees and Certificate of Status
- \$1,052.50 Filing Fees and Certified Copy
- \$1,061.25 Filing Fees, Certified Copy, and Certificate of Status

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**FILED**  
 10 MAR 10 PM 3:29  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

STATE OF FLORIDA )

COUNTY OF BROWARD )

The foregoing Certificate of Limited Partnership was acknowledged before me this 30 day of December, 2009, by **JON D. DONSHIK** [] who is personally known to me or [] who has produced \_\_\_\_\_ as identification, and who acknowledged that he signed such instrument of his own free will.

Doreen Scully  
Notary Public, State of Florida at Large  
Notary's printed or stamped name:  
My commission expires:

NOTARY PUBLIC-STATE OF FLORIDA  
Doreen Scully  
Commission #DD679125  
Expires: JULY 05, 2011  
BONDED THRU ATLANTIC BONDING CO., INC.

STATE OF FLORIDA )

COUNTY OF BROWARD )

The foregoing Certificate of Limited Partnership was acknowledged before me this 30 day of December, 2009, by **ALLISON S. KALMAR-DONSHIK** [] who is personally known to me or [] who has produced \_\_\_\_\_ as identification, and who acknowledged that she signed such instrument of her own free will.

Doreen Scully  
Notary Public, State of Florida at Large  
Notary's printed or stamped name:  
My commission expires: 7-5-2011

NOTARY PUBLIC-STATE OF FLORIDA  
Doreen Scully  
Commission #DD679125  
Expires: JULY 05, 2011  
BONDED THRU ATLANTIC BONDING CO., INC.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ACKNOWLEDGMENT BY REGISTERED AGENT**

Having been named to accept service of process for the above stated Partnership at the place designated in this Certificate of Limited Partnership, and being familiar with the duties and responsibilities of serving as registered agent for said Partnership, the undersigned hereby agrees to act in this capacity and to comply with the provisions of said laws.

  
\_\_\_\_\_  
JON D. DONSHIK

**FILED**  
10 MAR 10 PM 3:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA