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CONTACT:

CINDY HICKS

FROM:

CORPORATE & CRIMINAL RESEARCH SERVICES

103 N. MERIDIAN STREET

TALLAHASSEE, FL 32301

TELEPHONE:

222-1173

SUBJECT:

Rashkin Family Limited Partnership II

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 FEB 20 AM 10:44

STATE FEES PREPAID WITH CHECK # 1028 FOR \$ 1,331.75

100002435951--4
-02/20/98-01028-013
***1331.75 ***1331.75

PLEASE FILE:

- ☐ ARTICLES OF INC.
- ☐ QUALIFICATION
- ☐ FICTITIOUS NAME
- ☐ UCC-1

- ☒ AMENDMENT
- ☐ DISSOLUTION
- ☐ ANNUAL REPORT
- ☒ LIMITED PARTNERSHIP
- ☐ ANNUAL REPORT
- ☐ LIMITED LIABILITY
- ☐ REINSTATEMENT
- ☐ UCC-3

PROVIDE US WITH:

- ☐ CERTIFIED COPY

☒ CERTIFICATE OF STATUS

RECEIVED
98 FEB 20 AM 10:21
DIVISION OF CORPORATIONS

STANDARD COPY

Name	Availability
Document Examiner	
Updater	
Updater Verifier	
Acknowledgment	
W. P. Verifier	

Examiner's Initials

CERTIFICATE OF
LIMITED PARTNERSHIP OF
RASHKIN FAMILY LIMITED PARTNERSHIP II

FILED
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DIVISION OF CORPORATIONS
98 FEB 20 AM 10:14

The undersigned hereby executes and swears to this Certificate of Limited Partnership for the purpose of forming a limited partnership under the laws of the State of Florida.

1. Name of Partnership. The name of the Partnership shall be RASHKIN FAMILY LIMITED PARTNERSHIP II.

2. Address of Recordkeeping Office; Agent for Service of Process. The records to be kept pursuant to Florida Statute Section 620.106 shall be located at 4730 North Habana Avenue, Suite 303, Tampa, Florida 33614, and the name of the Partnership's agent for service of process at said address is JOSEPH C. RASHKIN.

3. Name and Business Address of the General Partner. The name and address of the General Partner is as follows:

<u>Name</u>	<u>Address</u>
Joseph C. Rashkin	4730 North Habana Avenue Suite 303 Tampa, Florida 33614

4. Mailing Address for the Limited Partnership. The mailing address for the Limited Partnership shall be located at P.O. Box 15837, Tampa, Florida 33684-5837.

5. Term. The term for which the Partnership is to exist shall be thirty (30) years from the filing of this Certificate in the Office of the Secretary of State of the State of Florida, unless sooner terminated in accordance with a Limited Partnership Agreement for RASHKIN FAMILY LIMITED PARTNERSHIP II.

DATED this 18th day of February, 1998.

GENERAL PARTNER:


Joseph C. Rashkin

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within Limited Partnership, at the place designated herein, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.


JOSEPH C. RASHKIN

2669-002-0456320.01

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DIVISION OF CORPORATIONS
98 FEB 20 AM 10:45

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

I, JOSEPH C. RASHKIN, the sole general partner of RASHKIN FAMILY LIMITED PARTNERSHIP II, a Florida limited partnership, hereinafter referred to as the "Partnership," who, upon being sworn, certifies as follows:

1. The limited partner has contributed \$149,000.00 of capital to the Partnership.

2. It is anticipated that an additional contribution of \$35,000.00 shall be contributed by the limited partner in the future.

This 18th day of February, 1998.

FURTHER AFFIANT SAYETH NOT.

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

GENERAL PARTNER:


Joseph C. Rashkin

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 18th day of February, 1998, by JOSEPH C. RASHKIN, as general partner of RASHKIN FAMILY LIMITED PARTNERSHIP II, on behalf of the limited partnership, who is personally known to me or who has produced _____ as identification and who did take an oath.

NOTARY PUBLIC
Name: Joyce Beacham
Commission No. _____
My Commission Expires: _____

JOYCE BEACHAM
My Commission CC565068
Expires Jun. 21, 2000

2669-002-0456320.01

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