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(City/State/Zip/Phone #)

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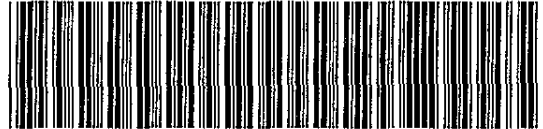
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increasing contribution
to \$788,232.00

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIEDTKE ASSOCIATES LTD.
(Name of Limited Partnership)

The enclosed Supplemental Affidavit and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NORMAN H. LIEDTKE
(Name of Person)

LIEDTKE ASSOCIATES LTD.
(Firm/Company)

615 LAKESIDE CIRCLE
(Address)

POMPAHO BEACH, FLORIDA 33060
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2001 NOV 12 P 3:08

FILED

For further information concerning this matter, please call:

NORMAN H. LIEDTKE
(Name of Person)

at (954) 941-8958
(Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of

LIEDTKE ASSOCIATES LTD., a
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 788,232.

This 9TH day of NOVEMBER, 2004.

FURTHER AFFIANT SAYETH NOT.

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

General Partner(s)

Norman H. Liedtke

FILED
2004 NOV 12 P 3:08
TALLAHASSEE, FLORIDA
SUCRE, CLYDE STATE

Fees:
\$7 per \$1000, based on additional contributions
Minimum \$ 52.50
Maximum \$1750.00

CK #1019 for \$1,750.00
Nov 9, 2004
SUBMITTED FGE

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314