

ADD 00000908

Sunstate Bank
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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Magical Midway of Central Florida, L
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. (G)
(Corporation Name) (Document #)

00 JUN - 6 AM 11:21
STATE
DIVISION OF CORPORATIONS

- ☒ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☒ Photocopy ☐ Certificate of Status
- Stamped*

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

500003278025-1
-06/06/00--01050--021
*****87.50 *****87.50

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

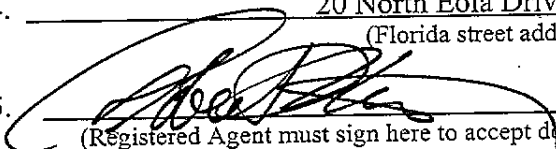
- ☐ Foreign
- ☒ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

RECEIVED
00 JUN - 6 AM 11:02
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

3/6/00

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP

1. MAGICAL MIDWAY OF CENTRAL FLORIDA, LTD.
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 20 North Orange Avenue, Suite 1600, Orlando, Florida 32801
(Business address of Limited Partnership)
3. Wright, Railey & Harding, P.A.
(Name of Registered Agent for Service of Process)
4. 20 North Eola Drive, Orlando, Florida 32801
(Florida street address for Registered Agent)
5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 20 North Orange Avenue, Suite 1600, Orlando, Florida 32801
(Mailing address of Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: December 31, 2040

8. Name(s) of general partner(s): _____ Street address: _____

Magical Midway, Inc.

20 North Orange Avenue, Suite 1600
Orlando, Florida 32801

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 5 day of June, 2000

Signature of all general partners:

MAGICAL MIDWAY, INC.

By: 

Robert L. Harding, Vice President

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIPS**

The undersigned, constituting all of the General Partners of MAGICAL MIDWAY OF CENTRAL FLORIDA, LTD., a Florida Limited Partnership, certify:

The amount of capital contributions, to date, of the limited partners is \$500.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$-0-.

Signed this 5th day of June, 2000.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury, I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

MAGICAL MIDWAY, INC., General Partner

By: _____

Robert L. Harding, Vice President

Sworn to and subscribed to before
me this 5th day of June, 2000, by
Robert L. Harding, who is personally
known to me.

Carol W Campbell

Notary Public, State of Florida

Serial No.:

My Commission Expires:



Carol W Campbell
My Commission CC885692
Expires October 27, 2003

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CLERK OF STATE
DIVISION OF CORPORATIONS
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