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AOIOOBOOO LAKE WALES October 11, 2000

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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## Re: Filing Fees for "NKST FAMILY LIMITED PARTNERSHIP"

Enclosed for filing are the following documents along with this firm's check in the amount of \$1,810.00:

- Certificate of Limited Partnership of the NKST FAMILY LIMITED PARTNERSHIP Registered Agent
- 2. Statement of Qualification

Upon approval and filing of these documents, please furnish copies to the attention of:

Keith H. Wadsworth Peterson & Myers, P.A. P.O. Box 1079 Lake Wales, FL 33859-1079

Keith H. Wadowold /MR

If anything further is required, please call me. Thank you for your assistance in this matter.

nce in this matter.

Sincerely,

Keith H. Wadsworth

/mr

enclosures

## STATEMENT OF QUALIFICATION OF FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

Pursuant to Section 620.187, Florida Statutes, the below named limited partnership submits the following Statement of Qualification:

- 1. The name of the partnership submitting this statement to register as a Limited Liability Limited Partnership is: **NKST FAMILY LIMITED PARTNERSHIP**, a Florida limited partnership.
  - 2. The address of the principal office of the partnership is:

220 East Main Street Bartow, FL 33830

The name and Florida street address of the Registered Agent and registered office for service of process on the partnership is:

Nelle Kennedy Stuart Terry 220 East Main Street Bartow, FL 33831

- 4. This partnership hereby elects to be a Florida limited liability limited partnership, and thereafter be known as: **NKST FAMILY LIMITED PARTNERSHIP**, **LLLP**, a Florida limited liability limited partnership.
- 5. The effective date of the Florida limited liability limited partnership will be the date this registration is filed with the Florida Secretary of State.
- 6. All general partners of the partnership have voted and approved the matters set forth herein.

FURTHER, AFFIANTS DO NOT SAY.

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GENERAL PARTNER:

Printed Name: Darlene R. Mills

NELLE KENNEDY STUART TERRY

Printed Name: Joyl. Green

STATE OF Florida
COUNTY OF POIK

I HEREBY CERTIFY that on the 30 that day of October, 2000, before me, the undersigned Notary Public, authorized in the State and County named above to administer oaths, personally appeared NELLE KENNEDY STUART TERRY, as general partner of the NKST FAMILY LIMITED PARTNERSHIP, who, after being by me first duly sworn, says upon oath the above statements. Sworn to and subscribed before me on this day by, NELLE KENNEDY STUART TERRY, as general partner of the NKST FAMILY LIMITED PARTNERSHIP, on behalf of the partnership. He or she is personally known to me or has produced FDL TLOOD-L37-41-713 as identification.

(SEAL)

Printed Name: Darlene R. Mills

Notary Public

My Commission Expires:



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SECRETARY OF STATE

**GENERAL PARTNER:** 

Printed Name: Keith H. Lard Sugarth

FLEETWOOD TAIT LANE, JR.

MALL KNIR ABBERTS
Printed Name: MSRY KAY ROBERTS

STATE OF MORTH CAROLINA COUNTY OF MERLEN BURG

I HEREBY CERTIFY that on the 17<sub>TH</sub> day of October 2000, before me, the undersigned Notary Public, authorized in the State and County named above to administer oaths, personally appeared FLEETWOOD TAIT LANE, JR., as general partner of the NKST FAMILY LIMITED PARTNERSHIP, who, after being by me first duly sworn, says upon oath the above statements. Sworn to and subscribed before me on this day by, FLEETWOOD TAIT LANE, JR., as general partner of the NKST FAMILY LIMITED PARTNERSHIP, on behalf of the partnership. He or she is personally known to me or has produced NCOC 7382020 as identification.

(SEAL)

Printed Name: Stmantha Marios

Notary Public

My Commission Expires: 10/28/2004

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SECRETARY OF STATE
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