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

(Corporation Name)	(Document #)
2.	
(Corporation Name)	(Document#) 200037912720- -03/01/01-01073001 *****87.50 *****87.50
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(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Copy
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NEW FILINGS	AMENDMENTS Amendment
Profit Not for Profit	Amendment Resignation of R A Officer/Director
Limited Liability	Change of Registered Agent
DomesticationOther	Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

| Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 5, 2001

DANIEL BLACK 1234 CAPE CHARLES AVENUE ATLANTIC BEACH, FL 32233-2222

SUBJECT: MD FAMILY LIMITED PARTNERSHIP

Ref. Number: W01000004910

We have received your document for MD FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 620.108, Florida Statutes, requires the certificate include the latest date upon which the partnership is to dissolve.

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) 487-6020.

Tammi Cline Document Specialist

Letter Number: 801A00013288

CERTIFICATE OF LIMITED PARTNERSHIP

1.	(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
	"Ltd.", or "Limited Partnership")
2.	1234 CAPE CHARLES AVENUE ATLANTIC BEACH, FL 32233 (The Business Address of Limited Partnership)
3.	Name of Registered Agent for Service of Process)
4.	1234 CAPE CHARLES AVENUE ATLANTIC BEACH, FL 32233 (Florida Street Address for Registered Agent)
5.	(Registered Agent must sign here to accept designation as Registered Agent for Service of Process.)
6.	1234 CAPE CHARLES AVENUE ATLANTIC BEACH, FL 32233 (The Mailing Address of the Limited Partnership.)
7.	The latest date upon which the Limited Partnership is to be dissolved is
8.	NAME OF GENERAL PARTNER(S) SPECIFIC ADDRESS TO THE PARTNER SPECIFIC ADDRESS
	DAN BLACK 1234 CAPE CHARLES AVENUE, ATLANTIC BEACH, FI

Signed this day of	, 2001
Dan Black	<u> </u>
General Partner	General Partner
General Partner	General Partner
General Partner	

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OF MAR 12 PH 4: 26

NIGHTANY OF STANDARD STANDARD

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of	f the general partners of p, a Florida Limited Partnership, certify as fol-
lows:	c , a rionda armod r armoramp, cermy as ior-
The amount of capital contributions to dat	e of the limited partners is \$ 2,000 00
The total amount contributed and anticipal at this time totals $\frac{2,000^{00}}{}$.	ted to be contributed by the limited partners
This 1st day of JANUARY	, 19 2001 .
FURTHER AFFIANT SAYETH NOT.	
Under the penalties of perjury I (we) declare that facts alleged are ture, to the best of my knowled	t I(we) have read the foregoing and that the ge and belief.
Dan Black	
General Partner	General Parnter
General Partner	General Partner
General Partner	General Partner