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100004033201--6
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***1818.75 ***1785.00

CONTACT: CINDY HICKS

DATE: 4-19-01

REF. #: 0672.15529

CORP. NAME: WILLIAM F. SUTTON FAMILY LIMITED PARTNERSHIP

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

( ) ARTICLES OF INCORPORATION ( ) ARTICLES OF AMENDMENT ( ) ARTICLES OF DISSOLUTION
( ) ANNUAL REPORT ( ) TRADEMARK/SERVICE MARK ( ) FICTITIOUS NAME
( ) FOREIGN QUALIFICATION (X) LIMITED PARTNERSHIP ( ) LIMITED LIABILITY
( ) REINSTATEMENT ( ) MERGER ( ) WITHDRAWAL
( ) CERTIFICATE OF CANCELLATION ( ) UCC-1 ( ) UCC-3
( ) OTHER: _____

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_____ **COST LIMIT: $** _____

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TALLAHASSEE, FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP OF WILLIAM F. SUTTON FAMILY LIMITED PARTNERSHIP

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 **WILLIAM F. SUTTON FAMILY LIMITED PARTNERSHIP.**

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 **16605 Avila Blvd., Tampa, Florida 33612**, and the name of the Partnership's agent for service of process at said address is **HELEN C. SUTTON.**

3. **Name and Business Addresses of the General Partner.**

Name	Address
Helen C. Sutton	16605 Avila Blvd. Tampa, Florida 33612

4. **Mailing Address for the Limited Partnership.** The mailing address for the Limited Partnership shall be **16605 Avila Blvd., Tampa, Florida 33612.**

5. **Term.** The term for which the Partnership is to exist shall be fifty (50) 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 **WILLIAM F. SUTTON FAMILY LIMITED PARTNERSHIP.**

DATED this 5th day of April, 2001.

GENERAL PARTNER:

Helen C. Sutton

HELEN C. SUTTON

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.

Helen C. Sutton

HELEN C. SUTTON

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

I, **HELEN C. SUTTON,** the General Partner of **WILLIAM F. SUTTON FAMILY LIMITED PARTNERSHIP,** a Florida limited partnership, hereinafter referred to as the "Partnership," who, upon being sworn, certifies as follows:

1. The limited partners have contributed $4,000,000.00 of capital to the Partnership.

2. It is anticipated that $ none of additional contributions may be contributed by the limited partners in the future.

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TALLAHASSEE, FLORIDA

Dated this 5th day of April, 2001.

FURTHER AFFIANT SAYETH NOT.

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

GENERAL PARTNER:

Helen C. Sutton

HELEN C. SUTTON

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 5 day of April, 2001, by **HELEN C. SUTTON**, who is personally known to me or who has produced Personally Known as identification.

Geneva Tucker

NOTARY PUBLIC
Name: Geneva Tucker
Serial No. CC957083
My Commission expires: July 25, 2004

GENEVA TUCKER
Notary Public, State of Florida
My Comm. Expires July 25, 2004
No. CC957083