

CCRS
105 N. MERIDIAN STREET, POWER LEVEL
TALLAHASSEE, FL 32309
222-1173

FILE 2ND

^{\$23.75}
A01000000530

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: CINDY HICKS

300004033203--0
-04/19/01--01067--025
1818.75 **33.75

DATE: 4-19-01

REF. #: 0672.15529

CORP. NAME: WILLIAM F. SUTTON FAMILY
LIMITED PARTNERSHIP, LLP

- | | | |
|--|---|--|
| ☐ ARTICLES OF INCORPORATION | ☐ ARTICLES OF AMENDMENT | ☐ ARTICLES OF DISSOLUTION |
| ☐ ANNUAL REPORT | ☐ TRADEMARK/SERVICE MARK | ☐ FICTITIOUS NAME |
| ☐ FOREIGN QUALIFICATION | ☐ LIMITED PARTNERSHIP | ☐ LIMITED LIABILITY |
| ☐ REINSTATEMENT | ☐ MERGER | ☐ WITHDRAWAL |
| ☐ CERTIFICATE OF CANCELLATION | ☐ UCC-1 | ☐ UCC-3 |

☒ OTHER: STATEMENT OF QUALIFICATION - LLP

STATE FEES PREPAID WITH CHECK# 1595 FOR \$ 1818.75
(33.75 FOR THIS FILING)

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$

PLEASE RETURN:

- ☐ CERTIFIED COPY ☐ CERTIFICATE OF GOOD STANDING
☒ CERTIFICATE OF STATUS

Examiner's Initials

LP - 25
CERT 8.75

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 APR 19 AM 10:00
NOT RECORDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING
☒ PLAIN STAMPED COPY

32
4/19

**STATEMENT OF QUALIFICATION FOR
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership as identified in the records of the Florida Department of State:
William F. Sutton Family Limited Partnership

Insert limited partnership's Florida document number: A01 006 000530
or

Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

2. Suffix adopted for the above named partnership: LLP
("Registered Limited Liability Partnership," "Limited Liability Partnership," "R.L.L.P.," "L.L.P.," "RLLP," or "LLP")

2.5 Name of Partnership after filing this statement: William F. Sutton Family Limited Partnership, LLP

3. The street address of its chief executive office: N/A
(if different from current recorded address)

4. The street address of principal office in Florida: N/A
(if different from above)

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. The effective date of this filing shall be:
X as of the date this document is filed with the Florida Secretary of State
or
_____ a date later than the time of filing: _____

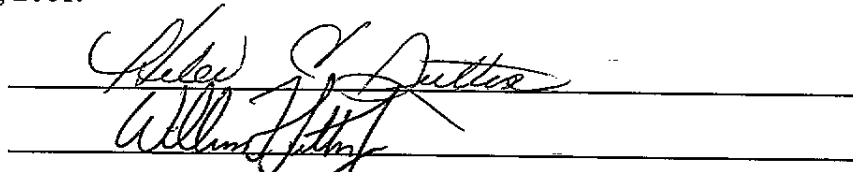
7. The name and Florida street address of the partnership's agent for service of process:

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

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 5th day of April, 2001.

Signature of TWO Partners:



Typed or printed names of partners signing above: Helen C. Sutton
William F. Sutton, Jr.

Filing Fee: \$25.00
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75