

A01000001162

Charles S. Dayhoff III

Requestor's Name

3830 Tampa Rd Ste 150

Address

Palm Harbor, FL 34684

City/State/Zip

Phone #

Office Use Only

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

\$ 25.00

1. _____ (Corporation Name) (Document #) 500004537095--9
-08/03/01--01094--001
2. _____ (Corporation Name) (Document #) *****112.50 *****25.00
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

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

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
01 AUG 30 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mtu
8/30

Examiner's Initials

**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: **EAGLE TITLE OF MAITLAND, LLLP.**

Insert limited partnership's Florida Document number: A01-1162
or

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

2. Suffix adopted for the above named partnership: **LLLP**
3. The street address of its chief executive office (if different from current recorded address):

26750 US 19 N. #550
CLEARWATER, FL 33761

4. The street address of principal office in Florida (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

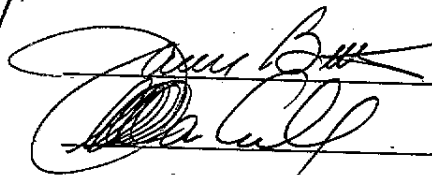
_____ a date later than the time of filing: _____

6. The name and Florida street address of the partnership's agent for service of process: **JARRELL BRITTS, 26750 U.S. Highway 19, Suite 550, Clearwater, Florida 33761.**

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 22 day of July, 2001.

Signature of TWO Partners: _____



Typed or printed names of
Partners signing above:

EAGLE TITLE & ABSTRACT CORPORATION,
INC., a Florida corporation, by JARRELL BRITTS,
President

MARSHALL MORTGAGE SERVICES, INC., a
Florida corporation, by RODNEY S. MARSHALL,
President

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA