

A01000001455

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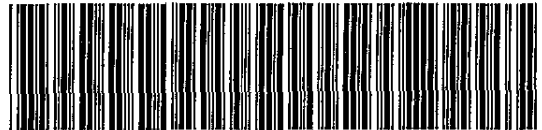
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sherrill Holdings Limited Partnership
(Name of Limited Partnership)

DOCUMENT NUMBER: A01000001455

The enclosed Statement of Qualification for Florida Limited Liability Limited Partnership and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carol A. Vance
(Name of Person)

(Firm/Company)

Carol A. Vance, Esq. CPA, LLC
411 55th Avenue
St. Pete Beach, FL 33706

(and Zip Code)

For further information concerning this matter, please call:

Carol A. Vance at 727, 367-1222
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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DIVISION OF CORPORATIONS

**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:
Sherrill Holdings Limited Partnership

Insert limited partnership's Florida document number: A01000001455

or

Attach Certificate of Limited Partnership, Affidavit of Capital Contributions and applicable limited partnership filing fees.

2. The complete name of the entity after filing Statement of Qualification shall be:

Sherrill Holdings LLP

(Must include LLLP or L.L.L.P.)

3. The street address of its chief executive office: 503 Suwanee Circle
(if different from current recorded address): Tampa, FL 33606

4. The street address of principal office in Florida: same
(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:

Carol A. Vance, Esq., CPA, LLC

411 55th Avenue

Florida

St. Pete Beach, FL 33706

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 January, 2004.

Signature of TWO Partners:

Carol A. Vance
James Williams

Typed or printed names of partners signing above:

Carol A. Vance
James Williams

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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