

# A01000000 1501

Amari & Theriac, P. A.  
Post Office Box 1807  
Cocoa, Florida 32923-1807

City/State/Zip

Phone #

Office Use Only

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

1. 300004674643--1  
(Corporation Name) (Document #) -11/07/01--01080--001  
\*\*\*1810.00 \*\*\*\*\*25.00
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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FILED  
01 NOV -7 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

A01-1501  
JR  
FF \$25.00

**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: **BJERNING FAMILY PARTNERSHIP**

Insert limited partnership's Florida document number: \_\_\_\_\_

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: 435 Footman Lane  
Merritt Island, Florida 32752

4. The street address of principal office in Florida: 435 Footman Lane  
Merritt Island, Florida 32752

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

6. The effective date of this filing shall be as of the date this document is filed with the Florida Secretary of State.

7. The name and Florida street address of the partnership's agent for service of process:  
Eugene K. Bjerning, 435 Footman Lane, Merritt Island, Florida 32752

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 23rd day of October, 2001.

Signature of TWO Partners:

Eugene K. Bjerning Co-Trustee  
Patricia L. Bjerning Trustee

Typed or printed names of  
partners signing above:

Eugene K. Bjerning and Patricia L. Bjerning as Co-Trustees  
of the Eugene K. Bjerning October 23, 2001 Trust,  
General Partner

Eugene K. Bjerning and Patricia L. Bjerning as Co-Trustees  
of the Patricia L. Bjerning 2001 October 23 2001 Trust,  
Limited Partner

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NOV - 7 PM 5:00  
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TALLAHASSEE, FLORIDA