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**EYECARE AND SURGERY CENTER
OF SOUTHWEST FLORIDA**

\$294 + \$35. = \$329

CHRISTOPHER T. STELLY, M.D.

00855-00524-00676-02963

MJH

3/4/2002

3/21

500005072595--6
-03/08/02--01033--002
****294.00 ****294.00

Please establish the 24166 Henry
Morgan Limited Partnership. A check
for \$294⁰⁰ is enclosed for filing fee

FILED
02 MAR 21 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W02-7093

Thank you,

500005072595--6
-03/25/02--01071--022
*****35.00 *****35.00

FF \$294
RA 35



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 13, 2002

CHRISTOPHER T. STELLY, M.D.
EYECARE AND SURGERY CENTER OF SOUTHEAST
100 MADRID BLVD., SUITE 511
PUNTA GORDA, FL 33950

SUBJECT: 24166 HENRY MORGAN LIMITED PARTNERSHIP
Ref. Number: W02000007093

We have received your document for 24166 HENRY MORGAN LIMITED PARTNERSHIP and your check(s) totaling \$294.00. However, the document has not been filed and is being retained in this office for the following:

The fee to file this Limited Partnership is \$294.00 plus \$35.00 for the Designation of Registered Agent.,

There is a balance due of \$35.00.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 702A00015284

CERTIFICATE OF LIMITED PARTNERSHIP

1. 24166 Henry Morgan Limited Partnership
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 100 Madrid Blvd Suite 511 Punta Gorda, FL 33950
(Business address of Limited Partnership)
3. Christopher Todd Stelly
(Name of Registered Agent for Service of Process)
4. 100 Madrid Blvd Suite 511 PG, FL 33950
(Florida street address for Registered Agent)
5. Christopher Todd Stelly
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 100 Madrid Blvd Suite 511, Punta Gorda, FL 33950
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 3/4/2027
8. Name(s) of general partner(s): _____ Street address: _____

Christopher Todd Stelly 100 Madrid Blvd Suite 511

Punta Gorda, FL 33950

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 4th day of March, 2002

Signature of all general partners:

Christopher Todd Stelly
General Partner

General Partner

General Partner

General Partner

General Partner

General Partner

FILED
02 MAR 21 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of 24166 Henry
Morgan Limited Partnership,

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 42,000⁰⁰.

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 42,000⁰⁰.

Signed this 4th day of March, 2002.

FURTHER AFFIANT SAYETH NOT.

*Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the
contents thereof and that the facts stated herein are true and correct.*

Christopher Todd
General Partner

General Partner

General Partner

General Partner

General Partner

General Partner