

**A02000000597**

Broad and CASSE

Requester's Name

215 S. MONROE, SUITE 400

Address

TLH, FL 32301

City/State/Zip

681-6810

Phone #

Call when ready

Patty Turnage

Office Use Only

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

1. (file second)

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

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**



Profit



Not for Profit



Limited Liability



Domestication



Other

**AMENDMENTS**



Amendment



Resignation of R.A., Officer/Director



Change of Registered Agent



Dissolution/Withdrawal



Merger

**OTHER FILINGS**



Annual Report



Fictitious Name

**REGISTRATION/QUALIFICATION**



Foreign



Limited Partnership



Reinstatement



Trademark



Other

Examiner's Initials

FILED  
02 APR 19 PM 2:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

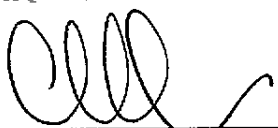
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-04/19/02--01046--006

\*\*\*175.00 \*\*\*\*\*86.25

CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
PRICE FAMILY ENTERPRISES, LTD.

In accordance with Chapter 620 of the Florida Statutes, each of the undersigned general partner(s) enters into this Certificate of Limited Partnership to form a limited partnership and states as follows: --

1. The name of the limited partnership is:  
PRICE FAMILY ENTERPRISES, LTD.
2. The business address of the limited partnership  
6299-5 Powers Avenue  
Jacksonville, Florida 32217
3. The name of the Registered Agent for service of process is  
CHARLES B. PRICE.
4. The Florida street address for the Registered Agent is:  
6299-5 Powers Avenue  
Jacksonville, Florida 32217
5. The mailing address for the limited partnership is:  
6299-5 Powers Avenue  
Jacksonville, Florida 32217
6. Signature of Registered Agent to accept designation as  
Registered Agent for Service of Process:  
  
\_\_\_\_\_  
CHARLES B. PRICE  
6299-5 Powers Avenue  
Jacksonville, Florida 32217
7. The latest date upon which the limited partnership is to  
dissolve is December 31, 2050.

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TALLAHASSEE, FLORIDA

8. The name and street address of the sole general partner  
is:

C. Price Management, Inc.  
6299-5 Powers Avenue  
Jacksonville, Florida 32217

PO2000042585

9. An affidavit declaring the amount of the capital contribu-  
tions of the Limited Partners and the amount anticipated to be  
contributed by the Limited Partners accompanies this Certificate of  
Limited Partnership.

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

SIGNED this APRIL 17, 2002 by the general partner.

C. PRICE MANAGEMENT, INC.

By: 

Its President

AFFIDAVIT OF CAPITAL CONTRIBUTIONS  
FOR PRICE FAMILY ENTERPRISES, LTD.

The undersigned constituting all of the general partners of PRICE FAMILY ENTERPRISES, LTD., a Florida limited partnership, certify:

1. The amount of capital contributions to date of the limited partners is \$100.00.

2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$100.00.

FURTHER AFFIANT SAYETH NOT.

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

SIGNED this APRIL 17, 2002.

C. PRICE MANAGEMENT

By: [Signature]  
Its President

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TALLAHASSEE, FLORIDA

STATE OF FLORIDA

COUNTY OF Leon

The foregoing instrument was sworn to, signed and acknowledged before me this April 17, 2002, by Charles B. Price, President of C. PRICE MANAGEMENT, INC., a Florida corporation, on behalf of the corporation, personally known to me or produced a Florida driver's license as identification and who personally appeared before me.



Joseph P. Jones  
MY COMMISSION # DD012912 EXPIRES  
March 27, 2005  
BONDED THRU TROY FAIN INSURANCE, INC.

[Signature]

NOTARY PUBLIC - STATE OF FLORIDA

Print Name: \_\_\_\_\_

My Commission expires: \_\_\_\_\_

Commission No.: \_\_\_\_\_