

A 020000001020

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

LLP 0200001868--5
-07/22/02--01062--009
***1810.00

500006560385--9
-07/22/02--01062--009
1810.00 **25.00

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

1. SHelmar LLC (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00 ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JUL 26 PM 3:46
LR-1/26

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 checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

LP = 25

RECEIVED
02 JUL 19 PM 3:18

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 22, 2002

FILINGS, INC.

SUBJECT: SHELMAR, LLLP
Ref. Number: W02000021101

RECEIVED
02 JUL 26 PM 3:09
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for SHELMAR, LLLP and your check(s) totaling \$1810.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please note that we are also returning your Statement of Qualification, because it cannot be filed until your Affidavit and Certificate are filed.,

Please return your document, along with 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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 802A00044632

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02 JUL 26 PM 3:46
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:
SHELMAR OF OVIEDO, LLLP

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
(LLLP, L.L.L.P.)
3. The street address of its chief executive office:
(if different from current recorded address): 6365 Lake Charm Circle
Oviedo, Florida 32765
4. The street address of principal office in Florida:
(if different from above): 6365 Lake Charm Circle
Oviedo, Florida 32765
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:
Miriam W. Bruce
6365 Lake Charm Circle
Oviedo, Florida 32765

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SECRETARY OF CORPORATIONS
02 JUL 26 PM 3:46

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed on June 27, 2002

Signature of TWO partners:

E. P. Bruce
E. P. Bruce
Miriam W. Bruce
Miriam W. Bruce

Filing Fee: \$25.00
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75