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CORPDIRECT AGENTS, INC. (formerly CCRS) 103 N. MERIDIAN STREET, LOWER LEVEL TALEAHASSEE, FL 32301 222-1173

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CONTACT:	PAM		
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CORP. NAME:	CAR	ILLON ASSOC	LA I ESCLTO
( ) ARTICLES OF INCOR ( ) ANNUAL REPORT ( ) FOREIGN QUALIFIC. ( ) REINSTATEMENT ( ) CERTIFICATE OF CA	ATION	( ) ARTICLES OF AMENDMENT ( ) TRADEMARK/SERVICE MARK (X) LIMITED PARTNERSHIP ( ) MERGER ( ) UCC-1	( ) ARTICLES OF DISSOLUTION ( ) FICTITIOUS NAME ( ) LIMITED LIABILITY ( ) WITHDRAWAL ( ) UCC-3
STATE FEES PRI		TH CHECK# 504318 FO 50432 CCOUNT IF TO BE DEBITE	OR\$ 1550 1837,50 C. 1682.50
	COST LIMIT: \$		
PLEASE RETURE  ( CERTIFIED COPY  ( ) CERTIFICATE OF	( )C	ERTIFICATE OF GOOD STANDING	( ) PLAIN STAMPED COPY

Examiner's Initials

#### CERTIFICATE OF LIMITED PARTNERSHIP

### CARILLON ASSOCIATES, LTD., a Florida limited partnership

The undersigned general partner desiring to form a limited partnership ("Partnership") pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Chapter 629 of the Florida Statutes, does hereby state the following:

1. The name of the Partnership is:

CARILLON ASSOCIATES, LTD.

2. The mailing address of the Partnership is:

240 S. Pineapple Avenue 10<sup>th</sup> Floor Sarasota, FL 34236

3. The principal office address of the Partnership is:

240 S. Pineapple Avenue 10<sup>th</sup> Floor Sarasota, FL 34236

4. The name and address of the registered agent of the Partnership is:

David S. Band 240 S. Pineapple Avenue, 10<sup>th</sup> Floor Sarasota, FL 34236

5. The name and address of the general partner of the Partnership is:

David S. Band 240 S. Pineapple Avenue, 10<sup>th</sup> Floor Sarasota, FL 34236

6. The Partnership shall have a perpetual existence, except as otherwise provided by law or in accordance with the Limited Partnership Agreement.

7. The effective date of this Partnership shall be the effective date of the filing of this Certificate of Limited Partnership with the Department of State.

The execution of this Certificate of Limited Partnership by the undersigned general partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by David S. Band, general partner of CARILLON ASSOCIATES, LTD., a Florida limited partnership, this day of January, 2003.

WITNESSES:

CARILLON ASSOCIATES, LTD., a Florida

limited partnership

David S. Band

**VERONICA DASCENZO** 

"GENERAL PARTNER"

## OS WARD A !! O ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

#### CARILLON ASSOCIATES, LTD. a Florida limited partnership

Having been named to accept service of process for CARILLON ASSOCIATES, LTD., a Florida limited partnership, at the place designated in the foregoing Certificate of Limited Partnership, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 620.192 of the Florida Statutes.

Date:

"REGISTERED AGENT"

#### STATE OF FLORIDA COUNTY OF SARASOTA

#### AFFIDAVIT OF CAPITAL CONTRIBUTIONS

## CARILLON ASSOCIATES, LTD., a Florida limited partnership

BEFORE ME, the undersigned Notary Public, personally appeared David S. Band, as general partner of CARILLON ASSOCIATES, LTD., a Florida limited partnership, ("Partnership,") who, upon being duly sworn, certified as follows:

- 1. The amount of the capital contributions of the limited partners of the Partnership is: \$1,717,000.00.
- 2. The amount of additional capital contributions of the limited partners of the Partnership anticipated is: \$0.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

WITNESSES:

CARILLON ASSOCIATES, LTD., a Florida limited partnership

By

By

Barrier B. Salaria

David S. Band

The foregoing instrument was acknowledged before me, this day of January, 2003, by David S. Band, as general partner of CARILLON ASSOCIATES, LTD., a Florida limited partnership, who is personally known to me and who did not take an oath.

CHERYL E. JOHNSON
My Comm Exp. 5/12/03
No. DD 046667
M Personally Known [10ther I D.

**VERONICA DASCENZO** 

Notary Public
Print Name

My Commission Expires

"GENERAL PARTNER"