

A03 000000 188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

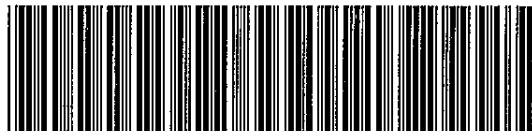
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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A03-188
OK

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03 FEB -6 PM 1:51
DIVISION OF CORPORATION

Thomas C. Wilkinson

Requester's Name

P. O. Box 138

Address

Marianna, FL 32447

City/State/Zip

Phone #

Office Use Only

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

1. Hasty Family Limited Partnership

(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

CERTIFICATE OF LIMITED PARTNERSHIP

1. Hasty Family Limited Partnership
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 5809 Concord Road, Bascom, Florida 32423
(Business address of Limited Partnership)
3. Walter Hasty
(Name of Registered Agent for Service of Process)
4. 5809 Concord Road, Bascom, Florida 32423
(Florida street address for Registered Agent)
5. Walter Hasty
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 5809 Concord Road, Bascom, Florida 32423
(Mailing Address of the Limited Partnership)

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

<u>Walter Hasty</u>	<u>5809 Concord Road</u>
_____	<u>Bascom, Florida 32423</u>
_____	_____
_____	_____

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

Signed this 4th day of February, ~~XX~~ 2003

Signature of all general partners:

<u>Walter Hasty</u> General Partner	_____ General Partner
_____	_____
General Partner	General Partner
_____	_____
General Partner	General Partner

*The earlier of the date upon which the Partnership is terminated under Code Section 708(b)(1) or upon which the Partnership ceases to be a going concern.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP

The undersigned constituting all of the general partners of the Hasty Family Limited
Partnership

a Florida Limited Partnership, certify:

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DIVISION OF CORPORATIONS
03 FEB -6 PM 1:56

The amount of capital contributions to date of the limited partners is \$ 469,260.00

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 469,260.00

Signed this 4th day of February, 2003

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.

Walter Hasty
General Partner

General Partner

General Partner

General Partner

General Partner

General Partner