

**A03000000206**

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**MJH**

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Account Name : FISHER, TOUSEY, LEAS & BALL  
Account Number : I19990000021  
Phone : (904) 356-2600  
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\* Please Note: The statement of Qualification is immediately following. \*

**FLORIDA LIMITED PARTNERSHIP**

**Rasmus Holdings, LLLP**

Certificate of Status	0
Certified Copy	1
Page Count	03
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JACKSONVILLE OFFICE**

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\*\*\*FLORIDA BAR BOARD CERTIFIED  
REAL ESTATE LAW

**FACSIMILE TRANSMITTAL**

DATE: February 10, 2003  
TO: Michelle Hodges  
FAX NUMBER: (850) 205-0383  
FROM: Kimberly D. Brafford, CLA, CFLA  
NUMBER OF PAGES: 8  
MESSAGE: Pursuant to our conversation, I am refaxing the Certificate of Limited Partnership and Statement of Qualification for Rasmus Holdings, LLLP. Please file them as of February 4, 2003, the date on which they were first filed. Thank you. Please call me if you have any questions.  
CLIENT: WILLIAA  
OPERATOR: kdb  
TIME: 11:33 AM

The pages accompanying this facsimile transmission contain information from the law firm of Fisher, Tousey, Leas & Ball, which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this cover letter. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the documents at no charge to you.

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904-356-2600

Department of State 2/5/2003 8:08 - PAGE 1/1 - RightFAX



FLORIDA DEPARTMENT OF STATE

Ken Detzner  
Secretary of State

February 5, 2003

FISHER, TOUSEY, LEAS & BALL

SUBJECT: RASMUS HOLDINGS, LLP  
REF: W03000003345

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please resubmit the Statement of Qualification at the same time.

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) 245-6967.

Michelle Hodges  
Document Specialist

FAX Aud. #: H03000042403  
Letter Number: 503AG0007655

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DIVISION OF CORPORATION

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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**CERTIFICATE OF LIMITED PARTNERSHIP OF  
RASMUS HOLDINGS, LLLP  
a Florida limited partnership**

The undersigned general partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Section 620.108 of the Florida Statutes, hereby states the following:

1. The name of the Partnership is Rasmus Holdings, LLLP.
2. The address of the office of the Partnership is c/o Robert M. Williams, 8299 Woodgrove Road, Jacksonville, Florida 32256.
3. The name and address of the agent for service of process on the Partnership are Robert M. Williams, 8299 Woodgrove Road, Jacksonville, Florida 32256.
4. The name and business address of the general partner are Rasmus Management, Inc., 8299 Woodgrove Road, Jacksonville, Florida 32256. **P03-13440**
5. The mailing address of the Partnership is 8299 Woodgrove Road, Jacksonville, Florida 32256.
6. The latest date upon which the Partnership shall dissolve is December 31, 2052.
7. A conveyance or encumbrance of real property held in the Partnership name, and any other instrument affecting title to real property in which the Partnership has an interest, shall be executed in the Partnership name by its general partner.

The execution of this Certificate 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 the sole general partner of Rasmus Holdings, LLLP this 27<sup>th</sup> day of January, 2003.

RASMUS MANAGEMENT, INC.

By: Robert M. Williams  
Robert M. Williams, President

**FILED**  
03 FEB -4 AM 8:59  
TALLAHASSEE, FLORIDA

((H03000042405 8)))

**ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT**

Having been named as registered agent for Rasmus Holdings, LLLP, a Florida limited partnership ("Partnership") in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all Statutes relative to the complete and proper performance of the duties of registered agent.

Dated this 27<sup>th</sup> day of January, 2003.

Robert M. Williams  
Robert M. Williams

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**  
**RASMUS HOLDINGS, LLLP**

BEFORE ME, the undersigned authority, personally appeared Robert M. Williams, President of Rasmus Holdings, Inc., a Florida corporation, constituting the sole general partner of Rasmus Holdings, LLLP, a Florida limited partnership, hereinafter referred to as the "Partnership," the address for which is 8299 Woodgrove Road, Jacksonville, Florida 32256, who, upon being duly sworn, certifies as follows:

1. The amount of initial capital contributions to the Partnership by the limited partners is \$299.00.
2. The amount of additional capital contributions anticipated is \$0.00.

FURTHER AFFIANT SAITH NOT.

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.

RASMUS MANAGEMENT, INC.

By: Robert M. Williams  
Robert M. Williams, President  
602-4150773523890  
10-4-02 10-29-01

STATE OF Florida  
COUNTY OF Duval

The foregoing instrument was acknowledged before me this 27 day of JAN, 2003, by Robert M. Williams, President of Rasmus Management, Inc., who is personally known to me or who has produced a driver's license as identification.

Michelle R. Grier  
Notary Public, State of: Florida  
Commission No.: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_



Michelle Lynn Grier  
My Commission DD058766  
Expires September 19, 2005