

**A0300000907**

Florida Department of State  
Division of Corporations  
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To:

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Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
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**FLORIDA LIMITED PARTNERSHIP**

braxton family partnership, ltd.

Certificate of Status	0
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P.01/01



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

June 19, 2003

EMPIRE CORPORATE KIT COMPANY

634-3694 ?

SUBJECT: BRAXTON FAMILY PARTNERSHIP, LTD.  
REF: W03000017639

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile 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 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) 245-6020.

Tammi Cline  
Document Specialist

FAX Aud. #: 803000217190  
Letter Number: 803A00037769

6/19/2003

Name has been corrected to  
HALB, Inc.

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

1-850-205 0383

TOTAL P.01

**CERTIFICATE OF LIMITED PARTNERSHIP**

**OF**

**BRAXTON FAMILY PARTNERSHIP, LTD.**

1. **BRAXTON FAMILY PARTNERSHIP, LTD.**

(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership").

2. **9132 SW 78 PLACE, MIAMI, FL 33156**

(The Business Address of Limited Partnership).

3. **HAROLD M. BRAXTON**

(Name of Registered Agent for Service of Process).

4. **9132 SW 78 PLACE, MIAMI, FL 33156**

(Florida Street Address for Registered Agent).

5. \_\_\_\_\_

(Registered Agent must sign here to accept designation as Registered Agent for Service of Process).

6. **9132 SW 78 PLACE, MIAMI, FL 33156**

(The Mailing Address of the Limited Partnership).

7. The latest date upon which the Limited Partnership is to be dissolved is 2038.

8. **NAME OF GENERAL PARTNER**

**SPECIFIC ADDRESS**

**HALB, INC.**

**9132 SW 78 PLACE  
MIAMI, FL 33156**

903-52795

Signed this 16 day of JUNE, 2003.

Signature of all general partners:

**HALB, INC.**

By: \_\_\_\_\_

**HAROLD M. BRAXTON, President**


**BRAXTON FAMILY PARTNERSHIP, LTD.**

**REGISTERED AGENT DESIGNATION**

**NAME AND ADDRESS OF REGISTERED AGENT:**

**HAROLD M. BRAXTON  
8132 SW 78 PLACE  
MIAMI, FL 33158**

**I HEREBY ACCEPT THE APPOINTMENT OF REGISTERED AGENT FOR BRAXTON  
FAMILY PARTNERSHIP, LTD.**

  
\_\_\_\_\_  
**HAROLD M. BRAXTON**

\_\_\_\_ day of JUNE, 2003.

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

**BEFORE ME, the undersigned constituting all of the General Partners of BRAXTON FAMILY PARTNERSHIP, LTD., a Florida Limited Partnership, certify as follows:**

The amount of capital contributions to date of the Limited Partners is \$1,000.00.

The total amount contributed and anticipated to be contributed by the Limited Partners at this time totals \$1,000.00.

This 18 day of JUNE, 2003.

**FURTHER AFFIANT SAYETH NOT.**

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

HALB, INC.

By: 

HAROLD M. BRAXTON, President

Signed this 18 day of JUNE, 2003.  
Signature of all General Partners:

C:\HRW\Braxton\PARTNERSHIP AGREEMENT.6/18/2003