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Requester's Name
STUART E. GOLDBERG
ATTORNEY AT LAW
P. O. BOX 12458
Address
TALLAHASSEE, FL 32317-2458
City/State/Zip Phone #

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

1. Knox Family Partnership, LLLP
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. LLP
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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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

CR2E031(7/97)

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: Knox Family Partnership, LLLP.

Insert limited partnership's Florida document number: _____
or
Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

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TALLAHASSEE, FLORIDA

2. Suffix adopted for the above named partnership: LLLP

3. The street address of principal office in Florida: 3715 Bobbin Mill Road
(if different from current recorded address): Tallahassee, Florida 32312

4. The street address of principal office in Florida: 3715 Bobbin Mill Road
Tallahassee, Florida 32312

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:
O. Jennings Knox, III
3715 Bobbin Mill Road
Tallahassee, Florida 32312

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

Signed this 25 day of July, 2003.

Signature of TWO Partners: _____
_____

Typed or printed names of partners signing above:

O. Jennings Knox, III **Cynthia Shaffield Knox**

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