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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Sheridan Shoppes C Limited Partnership (Name of Limited Partnership)	_		
(Name of Emitted Partiership)			
The enclosed Supplemental Affidavit and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Maria Victoria Currais, Esq.			
(Name of Person)			
Murai Wald Biondo Moreno & Brochin, PA			
(Firm/Company)			
	100	9	
25 SE 2nd Avenue, Suite 900			. 994
(Address)	<u> </u>	OWNOV 30 ATT	7
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Miami, FL 33131	Çiş -	=	:
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For further information concerning this matter, please call:	÷		
Maria V. Curais, Esq at (305) 358-5900			
(Name of Person) (Area Code & Daytime Telephone N	Vumber)		

STREET ADDRESS:
Stration Section
Section
Corporations
E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

The undersigned general partners of

SHERIDAN SHOPPES C LIMITED PARTNERSHIP, a
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112, Florida Statutes.
The total amount of the capital contributions of the limited partners is: \$ 308,769.10 .
This
FURTHER AFFLANT SAYETH NOT.
Under penalties of perjury, I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.
General Partner(s)
Sheridan C, Inc., a Florida corp, its sole general partner
Sheridan C, Inc., a Florida corp, its sole general partner By: Leitman Name: PHIUP LEITMAMitle: Exec. V.P.
Name: PHILIP LEITMANtitle: Exec. U.P.
Fees: \$7 per \$1000, based on additional contributions Minimum \$ 52.50 Maximum \$1750.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314