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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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December 28, 2004

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear Sirs,

Enclosed please find my check in the amount of \$ 87.50 representing the filing fees for a new limited partnership and registration of the registered agent.

Should you need any additional information, I trust you will contact me at your earliest convenience. Below you will find the address which you may send acknowledgment of this filing and with daytime numbers in which to reach me in case of any questions.

Thank you for your cooperation in this matter.

Sincerely,

Daniel E. Minton  
P.O. Box 391  
Sugar Grove, North Carolina 28679

(828) 297-7250 (Home and fax)  
(828) 773-6250 (Cell)

[fifo@appstate.net](mailto:fifo@appstate.net) Email address

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

January 6, 2005

DANIEL E. MINTON  
PO BOX 391  
SUGAR GROVE, NC 28679

SUBJECT: CREEKSIDE LIMITED PARTNERSHIP  
Ref. Number: W05000000879

We have received your document for CREEKSIDE LIMITED PARTNERSHIP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

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) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 105A00001084

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF LIMITED PARTNERSHIP**

- 1. of Boone  
Creekside Limited Partnership  
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
- 2. P.O. Box 391, Sugar Grove, North Carolina 28679  
(Business address of Limited Partnership)
- 3. Katherine G. Minton  
(Name of Registered Agent for Service of Process)
- 4. 136 Myrtle Street, Neptune Beach, Florida 32266  
(Florida street address for Registered Agent)
- 5. \_\_\_\_\_  
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
- 6. P.O. Box 391, Sugar Grove, North Carolina 28679  
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 12-31-2100

8. Name(s) of general partner(s): \_\_\_\_\_ Street address: \_\_\_\_\_

Daniel E. Minton PO 391, Sugar Grove, NC 28679

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Under 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.*

Signed this 28th day of December, 2004

Signature of all general partners:

  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

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TALLAHASSEE, FLORIDA

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS  
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of \_\_\_\_\_  
Creekside Limited Partnership

a Florida Limited Partnership, certify:

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

Signed this 28th day of December, 2004

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.*

  
\_\_\_\_\_  
General Partner  
DANIEL E. MINTON

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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