

A05000000145

00855-00524-00676-02963 \$1785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

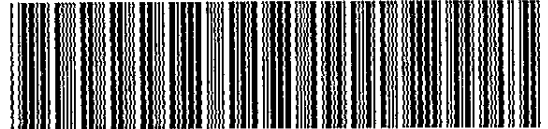
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

1/10 FLUP

Office Use Only

604-47422



500043423955

12/20/04--01056--004 **1750.00

01/18/05--01008--004 **35.00

JH

FILED
05 JAN 10 PM 2:45
FALLS CHURCH, VA

TODD W. KLISTON

ATTORNEY AT LAW

☒ 8211 West Broward Blvd.
Suite 375
Plantation, FL 33324
(954) 473-4900
Fax (954) 473-4907

☐ 861 E. Coco Plum Circle
Plantation, FL 33324
(954) 370-2370
Fax (954) 473-4907

December 17, 2004

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

VIA UPS OVERNIGHT

Re: Shamy Family Limited Partnership

Gentlemen:

Enclosed are the following:

1. Certificate of Limited Partnership
2. Acceptance of Appointment as Registered Agent
3. Affidavit Declaring Amount of Capital Contribution
4. Check payable to Secretary of State for \$1,750.00 for filing fee

Please register the above limited partnership.

Very truly yours,



Todd W. Kliston



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

December 29, 2004

TODD W. KLISTON
8211 WEST BROWARD BLVD., SUITE 375
PLANTATION, FL 33324

SUBJECT: SHAMY FAMILY LIMITED PARTNERSHIP
Ref. Number: W04000047422

We have received your document for SHAMY FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1750.00. However, the document has not been filed and is being retained in this office for the following:

The fee to file this Limited Partnership is \$1750, plus \$35 for the Designation of Registered Agent, totaling \$1785.00.,

There is a balance due of \$35.00.

Please return 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

Letter Number: 104A00071924

FAX AUDIT NUMBER _____

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
SHAMY FAMILY LIMITED PARTNERSHIP**

The undersigned, desiring to form a limited partnership pursuant to the laws of the State of Florida, does hereby execute and file with the Secretary of State of Florida this Certificate of Limited Partnership, as follows:

1. The name of the limited partnership is SHAMY FAMILY LIMITED PARTNERSHIP.
2. The business address and mailing address of the limited partnership is 7938 Wellwynd Way Boca Raton, FL 33496.
3. The name and address of the registered agent for service of process required by Section 620.105 of Florida Statutes is:

Todd W. Kliston
8211 W. Broward Boulevard
Suite 375
Plantation, FL 33324

4. The name and addresses of the General Partner is:

Shamy Holdings, Inc.
2724 W. Atlantic Boulevard
Pompano Beach, FL 33069

904-149859

5. The latest date on which the limited partnership is to dissolve is December 31, 2053.
6. The effective date of the commencement of the limited partnership is upon the filing of this certificate.

Date: Nov 1, 2004

Shamy Holdings, Inc.
A Florida corporation
General Partner

By [Signature]
President

05 JAN 10 PM 2:45

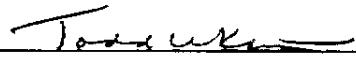
FILED

FAX AUDIT NUMBER _____

FAX AUDIT NUMBER _____

**ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT**

THE UNDERSIGNED, named as the agent for service of process in paragraph 3 of the Certificate of Limited Partnership of the Shamy Family Limited Partnership, hereby accepts the appointment as such registered agent, and acknowledges that he is familiar with, and accepts the obligations imposed upon registered agents under the Florida Revised Uniform Limited Partnership Act.



Todd W. Kliston,
Registered Agent

FAX AUDIT NUMBER _____

FAX AUDIT NUMBER _____

**AFFIDAVIT DECLARING AMOUNT OF
CAPITAL CONTRIBUTIONS OF LIMITED PARTNERS OF THE
SHAMY FAMILY LIMITED PARTNERSHIP**

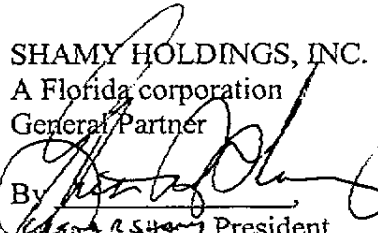
BEFORE ME, the undersigned, constituting the sole General Partner of the SHAMY FAMILY LIMITED PARTNERSHIP ("Partnership"), a Florida limited partnership, certifies as follows:

The limited partners' contributions to the Partnership consist of property having a value of \$ 1,000,000, and it is not anticipated that future contributions of limited partners will be made. It is the intention of the Partnership that this Affidavit be filed with the Secretary of State of the State of Florida, along with the Certificate of Limited Partnership.

FURTHER AFFIANT SAYETH 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.

SHAMY HOLDINGS, INC.
A Florida corporation
General Partner

By 
Shamy Holdings, Inc. President

FAX AUDIT NUMBER _____