

A05000000202

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TALLAHASSEE FLORIDA

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Kathi or Brent

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

1. Mason Family Limited Liability Limited Partnership
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

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NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ Other

BK

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

RECEIVED
05 JAN 28 AM 11:37
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

LLP0500000306-4
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Examiner's Initials

**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:

Mason Family Limited Partnership

Insert limited partnership's Florida document number: _____

or

Attach Certificate of Limited Partnership, Affidavit of Capital Contributions and applicable limited partnership filing fees.

2. The complete name of the entity after filing Statement of Qualification shall be:

Mason Family, LLLP

(Must include LLLP or L.L.L.P.)

3. The street address of its chief executive office: 3151 Mill Run Court
(if different from current recorded address): North Port, Florida 34284

4. The street address of principal office in Florida: _____
(if different from above) _____

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. The effective date of this filing shall be:

✓ 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:

John M. Compton
1819 Main St, Suite 610
Sarasota, Florida 34236

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 20th day of January, 2005.

Signature of TWO Partners:

Stanley W. Mason Jr
Doris A. Mason

Typed or printed names of partners signing above: Stanley W. Mason Jr
Doris A. Mason

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