

A050000000447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

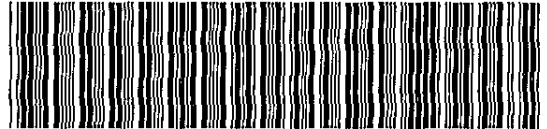
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02/25/05--01031--029 **140.00

DIVISION OF CORPORATION

05 FEB 25 PM 1:39

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 FEB 25 PM 3:06

FILED

W05-10021

J. BRYAN FEB 25 2005

\$148.00



236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

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2/25 (15)

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Partnership

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FEB 25 PM 3:06
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

1.) Sembler Family Partnership #39, 40
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

February 25, 2005

CORPORATE ACCESS, INC.

SUBJECT: SEMBLER FAMILY PARTNERSHIP 339, LTD.
Ref. Number: W05000010021

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05 FEB 25 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SEMBLER FAMILY PARTNERSHIP 339, LTD. and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

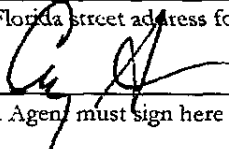
Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 605A00013475

**CERTIFICATE OF LIMITED PARTNERSHIP
OF**

1. Sembler Family Partnership #39, Ltd.
(Name of Limited Partnership; must contain a suffix such as "Limited," "Ltd.",
or "Limited Partnership")
2. 5858 Central Avenue, St. Petersburg, Florida 33707
(Business address of Limited Partnership)
3. Craig H. Sher, as President of Sembler Retail II, Inc. (General Partner)
(Name of Registered Agent for Service of Process)
4. 5858 Central Avenue, St. Petersburg, Florida 33707
(Florida street address for Registered Agent)
5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 5858 Central Avenue, St. Petersburg, Florida 33707
(Mailing address of the Limited Partnership)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

7. The latest date upon which the Limited Partnership is to be dissolved is January 1, 2030.

8. Name of general partner(s):

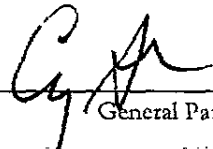
Specific address:

<u>Sembler Retail II, Inc.</u>	<u>5858 Central Avenue</u>
<u></u>	<u>St. Petersburg, Florida 33707</u>
<u></u>	<u></u>
<u></u>	<u></u>
<u></u>	<u></u>

Signed this 24th day of February 2005

Signature of all general partners:

Sembler Retail II, Inc.

<u></u>	<u>President</u>
<u>General Partner</u>	<u>General Partner</u>
<u>General Partner</u>	<u>General Partner</u>
<u>General Partner</u>	<u>General Partner</u>

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned constituting all of the general partners of Sembler Family Partnership #39, Ltd., a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 99.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 99.00.

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.

Sembler Retail II, Inc.



General Partner

President

General Partner

General Partner

General Partner

General Partner

General Partner

Signed this 24th day of February 2005.