

AU5000001031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

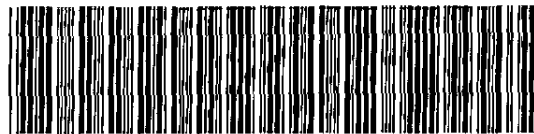
(Document Number)

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RECEIVED
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05 MAY 23 AM 7:26
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
OFFICE OF REGISTRATIONS
AND CORPORATIONS

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

City/St/Zip

850-222-2785

Phone #

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1- AMERA SOUTHLAND, LTD.

2- _____

3- _____

4- _____

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP OF
AMERA SOUTHLAND, LTD.,
a Florida limited partnership

FILED
05 MAY 23 AM 7:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (1986), hereby states:

1. The name of the Partnership is AMERA SOUTHLAND, LTD.
2. The address of the office of the Partnership is 2900 University Drive, Coral Springs, Florida 33065.
3. The name and address of the agent for service of process on the Partnership is AMERA ASSOCIATES, INC., a Florida corporation, 2900 University Drive, Coral Springs, Florida 33065.
4. The name and business address of the sole general partner is AMERA ASSOCIATES, INC., a Florida corporation, 2900 University Drive, Coral Springs, Florida 33065.
5. The mailing address of the Partnership is 2900 University Drive, Coral Springs, Florida 33065.
6. The latest date upon which the Partnership will dissolve is December 31, 2080.

The execution of this certificate by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed on behalf of the sole General Partner of AMERA SOUTHLAND, LTD., this 19th day of May, 2005.

GENERAL PARTNER:

AMERA ASSOCIATES, INC., a
Florida corporation

By: Charles B. Ladd
Charles B. Ladd, Vice President

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

STATE OF FLORIDA

COUNTY OF BROWARD

BEFORE ME, the undersigned authority, personally appeared CHARLES B. LADD, Vice President of AMERA ASSOCIATES, INC., a Florida corporation, the sole General Partner of AMERA SOUTHLAND, LTD. (the "Partnership"), who, upon being duly sworn, certifies as follows:

1. The amount of capital contributions to the Partnership made by the limited partners is, in the aggregate, Seven Thousand Five Hundred and 00/100 (\$7,500.00) Dollars.

2. At this time, it is not anticipated that additional capital contributions will be made by the limited partners.

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.

AMERA ASSOCIATES, INC., a
Florida corporation

By: Charles B. Ladd
Charles B. Ladd, Vice President

Date: May 19th, 2005

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared CHARLES B. LADD, Vice President of AMERA ASSOCIATES, INC., a Florida corporation, personally known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as Vice President of AMERA ASSOCIATES, INC., a Florida corporation, sole General Partner of AMERA SOUTHLAND, LTD.

IN WITNESS WHEREOF, I have set my hand and affixed my official seal in the State and County aforesaid, this 19th day of May, 2005.

Erin R. Galbreath
(signature of notary)

ERIN R. GALBREATH
(printed name of notary)

Notary Public, State of Florida

Erin R. Galbreath

MY COMMISSION # DD205039 EXPIRES

April 21, 2007

BONDED THRU TROY FAIR INSURANCE, INC.

My commission expires:



ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as statutory registered agent for AMERA SOUTHLAND, LTD., a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, the undersigned hereby agrees to act in that capacity, and, on behalf of the Partnership, to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

REGISTERED AGENT:

AMERA ASSOCIATES, INC., a
Florida corporation

By: Charles B. Ladd
Charles B. Ladd, Vice President