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2005 JUL 19 P 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LAW OFFICES
AMARI & THERIAC, P.A.
Attorneys and Counselors At Law

Bradly Roger Bettin, Sr.
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Mariner Square
96 Willard Street, Suite 302
Cocoa, Florida 32922
Telephone (321) 639-1320
Facsimile (321) 639-6690

June 21, 2005

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: WinPar Hospitality, LLLP

Our File No.: 05-0131

Dear Sir or Madam:

Enclosed for filing with regards to the above named limited partnership are the following original documents:

1. Certificate of Limited Partnership;
2. Affidavit of Capital Contribution; and
3. Statement of Qualification for Florida Limited Liability Partnership

Also, enclosed is our check payable to the Secretary of State in the amount of \$121.25 to cover the following:

Filing fee:	\$52.50
Registered Agent Designation:	\$35.00
Certificate of Status:	\$ 8.75
Statement of Qualification:	\$25.00

Please return a Certificate of Status to the undersigned at the above listed address. If you have any questions concerning the foregoing, please call me at 321-639-1320.

Sincerely,

Amari & Theriac, P.A.

By: 

Matthew J. Monaghan, Esquire

MJM/lac
Enclosures

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TALLAHASSEE, FLORIDA

**STATEMENT OF QUALIFICATION
AS A
LIMITED PARTNERSHIP**

1. The name of the limited partnership is as identified in the records of the Florida Department of State: **WINPAR HOSPITALITY**

Insert limited partnership's Florida document number: _____
or

Attach certificate of limited partnership, affidavit capital contributions and applicable limited partnership filing fees.

2. Suffix adopted for the above named partnership: **LLLP**
("Registered Limited Liability Partnership", "Limited Liability Partnership", "R.L.L.P.", "L.L.P.", "RLLP", or "LLP")

3. The street address of its chief executive office: 3550 N. Atlantic Avenue
Cocoa Beach, FL 32931

4. The street address of its principal office in Florida: 3550 N. Atlantic Avenue
Cocoa Beach, FL 32931

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.

7. The name and Florida street address of the partnership's agent for service of process:

William R. Parsons
3550 N. Atlantic Avenue
Cocoa Beach, FL 32931

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 3 day of June, 2005.

Signature of TWO Partners:

BILLCAPAR, LLC

By: William R. Parsons
William R. Parsons, Manager, General Partner

Karen Lee Parsons
Karen Lee Parsons, Limited Partner

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TALLAHASSEE, FLORIDA

Filing Fee: \$25.00

Certified Copy (optional) \$52.50

Certificate of Status (optional) \$8.75