

A05000002038

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(Address)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STANLEY FAMILY LIMITED PARTNERSHIP
(Name of Limited Partnership)

DOCUMENT NUMBER: A05000002038

The enclosed Statement of Qualification for Florida Limited Liability Limited Partnership and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

THOMAS M. STANLEY
(Name of Person)

MacMILLAN & STANLEY, PLLC
(Firm/Company)

29 NE 4TH AVENUE
(Address)

DELRAY BEACH, FL 33483
(City/State and Zip Code)

For further information concerning this matter, please call:

THOMAS M. STANLEY at (561) 276-6363
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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**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:

STANLEY FAMILY LIMITED PARTNERSHIP

Insert limited partnership's Florida document number: A05000002038

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:

STANLEY FAMILY LIMITED PARTNERSHIP, LLLP

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

3. The street address of its chief executive office: _____
(if different from current recorded address): _____

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:

THOMAS M. STANLEY

29 NE 4TH AVENUE

DELRAY BEACH

Florida 33483

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 9 day of NOVEMBER, 2005

Signature of TWO Partners:

Paul O Stanley
Carol M Stanley

Typed or printed names of partners signing above:

CECIL O. STANLEY, JR.

CAROL M. STANLEY

Filing Fee: \$25.00

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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TALLAHASSEE, FLORIDA

Certificate of Limited Partnership

Name of Limited Partnership:

STANLEY FAMILY LIMITED PARTNERSHIP

A05000002038

FILED

November 09, 2005

Sec. Of State

gharvey

Business Address of Limited Partnership:

29 NE 4TH AVENUE
DELRAY BEACH, FL. 33483

Mailing Address of Limited Partnership:

29 NE 4TH AVENUE
DELRAY BEACH, FL. 33483

The name and Florida street address of the registered agent is:

THOMAS M STANLEY
29 NE 4TH AVENUE
DELRAY BEACH, FL. 33483

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: THOMAS M. STANLEY

The latest date upon which the Limited Partnership is to be dissolved is:

PERPETUAL

The name and address of all general partners are:

Title: G
STANLEY INVESTMENTS, LLC
29 NE 4TH AVENUE
DELRAY BEACH, FL. 33483

The effective date for this Limited Partnership shall be:

11/09/2005

**Affidavit of Capital Contributions
For Florida Limited Partnership**

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November 09, 2005
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The undersigned constituting all of the general partners of:
STANLEY FAMILY LIMITED PARTNERSHIP

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is:

250,000.00

The total amount contributed and anticipated to be contributed by the
limited partners at this time totals:

250,000.00

Signed this Ninth day of November, 2005

Under the penalties of perjury I (we) declare the I (we) have read the foregoing
and know the contents thereof and that the facts stated herein are true and correct.

General Partner Signature: THOMAS M. STANLEY