

A05000002060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

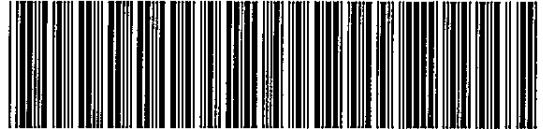
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

BK

Office Use Only



900061031489

FILED

05 NOV 16 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

05 NOV 16 AM 11:51

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FLORIDA FILING & SEARCH SERVICES, INC.
P.O. BOX 10662 TALLAHASSEE, FL 32302
1333 N. DUVAL STREET, TALLAHASSEE, FL 32303
PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 11-15-05

NAME: LADY LAKE POINTE COMMERCIAL DEVELOPMENT, LLLP

TYPE OF FILING: STATEMENT OF QUALIFICATION

COST: \$25

RETURN:

ACCOUNT: FCA0000000015

AUTHORIZATION: ABBIE/PAUL HODGE



FILED
05 NOV 16 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
05 NOV 16 AM 11:2
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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:

Lady Lake Pointe Commercial Development Group, Ltd.

Insert limited partnership's Florida document number: A05000002060

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:

Lady Lake Pointe Commercial Development Group, L.L.L.P.

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

3. The street address of its chief executive office: 1551 Sandspur Road
(if different from current recorded address):

Maitland, FL 32751

4. The street address of principal office in Florida: same
(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:

B&C Corporate Services of Central Florida, Inc.

390 N. Orange Avenue, Suite 1100

Orlando, Florida 32801

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 15 day of November, 2005

Signature of TWO Partners: _____

Typed or printed names of partners signing above: please see attachment
for signatures

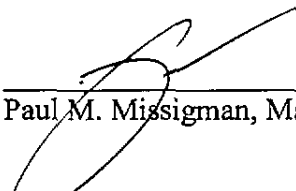
Filing Fee: \$25.00
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

FILED
05 NOV 16 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signatures of TWO Partners:

LADY LAKE POINTE COMMERCIAL DEVELOPMENT MANAGERS, L.L.C.,
a Florida limited liability company

By:


Paul M. Missigman, Manager

LADY LAKE POINTE COMMERCIAL DEVELOPMENT PARTNERS, LTD., a
Florida limited partnership

By: Lady Lake Pointe Commercial Development Partners, L.L.C., a
Florida limited liability company, its
general partner

By:


W. Scott Culp, Manager