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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
•	r	•
(Do	cument Number)	
, C∉rtified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

WOOD OF



January 30, 2006

RONALD KING 9259 EDENSHIRE CIR ORLANDO, FL 32836

SUBJECT: R & S KING FAMILY LIMITED LIABILITY PARTNERSHIP NO. 1

Ref. Number: W06000004564

We have received your document for R & S KING FAMILY LIMITED LIABILITY PARTNERSHIP NO. 1 and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The effective day must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 506A00006627

COVER LETTER

TO: Registration Section Division of Corporations	-
SUBJECT: R+5 King Family LL (Name of Florida Limited Partnership or Limit	LP. No. 1 ed Liability Limited Partnership)
The enclosed Certificate of Limited Partnership and	d fees are submitted for filing.
Please return all correspondence concerning this ma	atter to:
Ronald A. King (Contact Person)	
	6 FEB
(Firm/Company) 9259 Edonshum Carele	SECRETARY OF STATE SECRETARY OF STATE CRAIN
(Address)	E.F.S.
9259 Edonshive Circle (Address) Orlando, FL 32836 (City, State and Zip Code)	
For further information concerning this matter, plea	ace call.
(Name of Contact Person) at (•
(Name of Contact Person) (A	Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$1,000.00 Filing Fees \$\int \\$1,008.75 Filing	52.50 Filing Fees S1,061.25 Filing Fees, rtified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
CR2E030 (01/06)	. .

· CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

	S King Family LLLP. No. 1	
eptable Limite:	nited Partnership or Limited Liability Limited Partnership, which must d Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. d Liability Limited Partnership suffixes: Limited Liability Limited Par	
	9259 Edenshire Circle	
	(Street address of initial designated office)	
	Orlando, FL 32836	Es.
	Bondd A King	CRET
	(Name of Registered Agent for Service of Process)	SSE
	9259 Edenshine Circle	FR
	(Florida street address for Registered Agent)	ان بران مار بران
	Orlando, FL 32836	33 July 1
ply with the pr	t the appointment as registered agent and agree to act in this capacity. Tovisions of all statutes relative to the proper and complete performance with and accept the obligations of my position as registered agent.	I further agree e of my duties, -
	[Conal aly	
	Signature of Registered Agent	
	9259 Edenshire Circle	
	(Mailing address of initial designated office)	

7. If limited partnership elects to be a limited liability limited partnership, check box

8. Name and business address of e Name:		partner: usiness Ad	ldress:				
Ronald A. King				x shix	e Ci	rele	
	•	9259 Orla	endo	FL	32°	83C	
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						87	t
9. Effective date, if other than the date of							. ·
(Effective date cannot be prior to no filed by the Florida Department of s	State.)		ifter the	date th	e docui	nent is	
Signed this3 H day o	f Feb	2006				<u> </u>	
Signature of each general partner:							
750,000							
		. <u></u>					_
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 \$52.50 \$8.75		g Fee and	\$35 Reg	istered A	.gent Fee))
	Page 2 o	II Z					