

A06 0000000253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

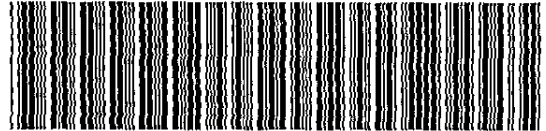
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400063849414

02/01/06--01016--005 \*\*1061.25

2006 FEB 14 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

A06-253  
gh



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 10, 2006

TRUMAN COSTELLO  
12670 NEW BRITTANY BLVD., SUITE 101  
FORT MYERS, FL 33907

SUBJECT: MILLER FAMILY PARTNERSHIP, LTD.  
Ref. Number: W06000006636

We have received your document for MILLER FAMILY PARTNERSHIP, LTD. and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return your document, along with a copy of this letter, within 60 days or 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: 806A00009890

2005 FEB 14 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Miller Family Partnership, Ltd.  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Truman J. Costello, P.A.  
(Contact Person)  
Costello, Royston & Pond  
(Firm/Company)  
12670 New Brittany Blvd., Ste. 101  
(Address)  
Fort Myers, FL 33907  
(City, State and Zip Code)

For further information concerning this matter, please call:

Truman J. Costello at ( 239 ) 939-2222  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fees ☐ \$1,008.75 Filing Fees ☐ \$1,052.50 Filing Fees ☒ \$1,061.25 Filing Fees,  
(\$965 Filing Fee and and Certificate of and Certified Copy Certified Copy, and  
\$35 Registered Agent Status Certificate of Status  
Fee)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

CR2E030 (01/06)

2006 FEB 14 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** S. Miller Family Partnership, Ltd.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Truman J. Costello, P.A.

(Contact Person)

Costello, Royston & Pond

(Firm/Company)

12670 New Brittany Blvd., Ste. 101

(Address)

Fort Myers, FL 33907

(City, State and Zip Code)

For further information concerning this matter, please call:

Truman J. Costello

(Name of Contact Person)

at (

239

) 939-2222

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fees ☐ \$1,008.75 Filing Fees ☐ \$1,052.50 Filing Fees ☒ \$1,061.25 Filing Fees,  
(\$965 Filing Fee and and Certificate of and Certified Copy Certified Copy, and  
\$35 Registered Agent Status Status Certificate of Status  
Fee)

**STREET ADDRESS:**

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

**MAILING ADDRESS:**

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

CR2E030 (01/06)

2006 FEB 14 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

1. S. Miller Family Partnership, Ltd.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.*  
*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.  
or LLLP.*

2. 9250 Corkscrew Road, #8

(Street address of initial designated office)

Estero, FL 33928

3. Truman J. Costello

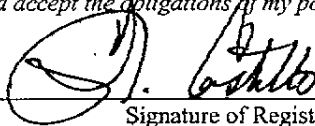
(Name of Registered Agent for Service of Process)

4. 12670 New Brittany Blvd., Suite 101

(Florida street address for Registered Agent)

Fort Myers, FL 33907

5. *I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



Signature of Registered Agent

6. 9250 Corkscrew Road #8

(Mailing address of initial designated office)

Estero, FL 33928

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

2006 FEB 14 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

FILED

8. Name and business address of each general partner:

Name:

Business Address:

SSM. LLC

9250 Corkscrew Road #8

Estero, FL 33928

Document#L06000009651

2006 FEB 14 PM 12:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

9. Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)*

Signed this 13th day of February, 2006

Signature of each general partner:

SSM, LLC

by: Stephanie Miller

Stephanie Miller, Manager

Filing Fees:

**\$1,000.00** (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

**\$52.50**

Certificate of Status (optional):

**\$8.75**

Page 2 of 2