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06 MAR -2 PM 2:59  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Lockey Family Limited Partnership  
(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:

Karen J. Prevatt

(Contact Person)

Morrison & Mills, P. A.

(Firm/Company)

1200 West Platt St., Suite 100

(Address)

Tampa, Florida 33606

(City, State and Zip Code)

For further information concerning this matter, please call:

Karen J. Prevatt at ( 813 ) 258-3311

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

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

**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)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 15, 2006

KAREN J. PREVATT  
MORRISON & MILLS, P.A.  
1200 WEST PLATT STREET, SUITE 100  
TAMPA, FL 33606

SUBJECT: THE LOCKEY FAMILY LIMITED PARTNERSHIP  
Ref. Number: W06000007445

We have received your document for THE LOCKEY FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1793.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because of recent changes to Chapters 607, 608, and 620, Florida Statutes, which became effective January 1, 2006, your document does not meet current filing requirements. For your convenience, we are enclosing the correct form and instructions.

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) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 306A00010980

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

1. The Lockey Family Limited Partnership

(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. 2708 West Marlin Street

(Street address of initial designated office)

Tampa, Florida 33611

3. Karen J. Prevatt

(Name of Registered Agent for Service of Process)

4. 1200 West Platt Street, Suite 100

(Florida street address for Registered Agent)

Tampa, Florida 33606

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.*

Karen J. Prevatt

Signature of Registered Agent

6. 2708 West Marlin Street

(Mailing address of initial designated office)

Tampa, Florida 33611

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

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STATE  
TALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

Richard F. Lockey

2708 West Marlin Avenue

Tampa, Florida 33611

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TALLAHASSEE, FLORIDA

9. Effective date, if other than the date of filing: MARCH 10, 2006

*(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 28<sup>th</sup> day of February 2006.

Signature of each general partner:

Richard F. Lockey

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

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

\$52.50

\$8.75

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