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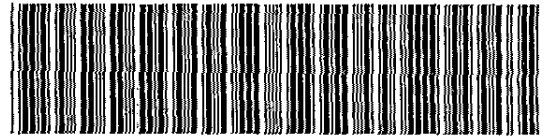
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CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 03/13/2007

REF. #: 000672.65377

CORP. NAME: CHANEL'S FAMILY LIMITED PARTNERSHIP, LLLP

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- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input checked="" type="checkbox"/> OTHER: LLLP | | |

STATE FEES PREPAID WITH CHECK# 520526 FOR \$ 1008.75

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

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| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**CERTIFICATE OF LIMITED PARTNERSHIP OF
CHANEL'S FAMILY LIMITED PARTNERSHIP, LLLP**

FILED
07 MAR 13 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned hereby execute and swear to this Certificate of Limited Partnership for the purpose of forming a limited partnership (the "Partnership") under the laws of the State of Florida:

1. **Name of the Partnership.** The name of the Partnership shall be **CHANEL'S FAMILY LIMITED PARTNERSHIP, LLLP**.

2. **Address of Designated Office; Agent for Service of Process.** The records to be kept pursuant to *Florida Statutes* Section 620.1111 shall be located at **975 Lake Hollingsworth Drive, Lakeland, Florida 33803**, and the name of the Partnership's agent for service of process at said address is **Ernest Vane McClurg**.

3. **Names and Addresses of the General Partners.** The names and addresses of the General Partners of the Partnership are as follows:

<u>Name</u>	<u>Address</u>
Ernest Vane McClurg	975 Lake Hollingsworth Drive Lakeland, Florida 33803
Adele M. Morgan	306 Kenwith Road Lakeland, Florida 33803
Hayden C. McClurg	1826 Meredith Drive Atlanta, Georgia 30318
Margaret L. Stedman	3741 Haddon Road Atlanta, Georgia 30329

4. **Mailing Address for the Partnership.** The mailing address for the Partnership shall be **c/o Ernest Vane McClurg, Post Office Box 505, Lakeland, Florida 33802-0505**.

5. **Term.** The term for which the Partnership is to exist shall be fifty (50) years from the filing of this Certificate of Limited Partnership with the Secretary of State of the State of Florida, unless sooner terminated in accordance with a Limited Liability Limited Partnership Agreement for **CHANEL'S FAMILY LIMITED PARTNERSHIP, LLLP**.

6. **Limited Liability Limited Partnership.** The Partnership elects to be a limited liability limited partnership.

DATED this 8th day of March, 2007.

GENERAL PARTNERS:

Ernest Vane McClurg
ERNEST VANE McCLURG

Adele M. Morgan
ADELE M. MORGAN

Hayden C. McClurg
HAYDEN C. McCLURG

Margaret L. Stedman
MARGARET L. STEDMAN

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the Partnership, at the place designated herein, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Date: March 8, 2007

Ernest Vane McClurg
ERNEST VANE McCLURG