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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

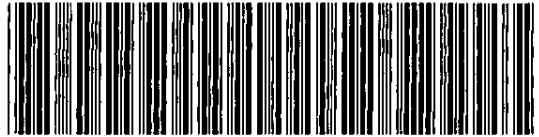
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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M. THOMAS

DEC - 3 2008

EXAMINER

Law Offices of
FREDERIC T. DEHON, JR., P.A.
PGA CONCOURSE BUILDING, SUITE 211
5606 PGA BOULEVARD
PALM BEACH GARDENS, FLORIDA 33418

FREDERIC T. DEHON, JR.
Attorney and Certified Public Accountant

Of Counsel to:
STEPHEN S. MATHISON, P.A.

TELEPHONE: (561) 624-2001
TELECOPIER: (561) 624-0036

December 1, 2008

Via UPS Overnight Delivery

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

Re: Eagle Equity Partners, LLLP

Gentlemen:

Enclosed please find for filing the Certificate of Limited Partnership for Florida Limited Partnership for Limited Liability Limited Partnership for Eagle Equity Partners, LLLP, as well as our client's check payable to your order in the amount of \$1,000.00 for the filing fee, and a completed form cover letter.

If there are any questions or problems with this filing, please contact me at the number indicated above. Thank you for your attention to this matter.

Very truly yours,


Frederic T. DeHon, Jr.

FTDJr./jz
Enclosures

cc: Mr. John J. Delaney

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Eagle Equity Partners, LLLP

(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:

Frederic T. DeHon, Jr., Esquire

(Contact Person)

Stephen S. Mathison, P.A.

(Firm/Company)

5606 PGA Blvd., Ste. 211

(Address)

Palm Beach Gardens, Florida 33418

(City, State and Zip Code)

For further information concerning this matter, please call:

Judith Zammit

(Name of Contact Person)

at (561) 624-2001

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$1,000.00 Filing Fees
(\$965 Filing Fee and
\$35 Registered Agent
Fee) | <input type="checkbox"/> \$1,008.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$1,052.50 Filing Fees
and Certified Copy | <input type="checkbox"/> \$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

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TALLAHASSEE, FLORIDA

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

1. Eagle Equity Partners, LLLP

(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. 7230 Winding Bay Lane

(Street address of initial designated office)

West Palm Beach, Florida 33412

3. Stephen S. Mathison, P.A.

(Name of Registered Agent for Service of Process)

4. 5606 PGA Blvd., Ste. 211

(Florida street address for Registered Agent)

Palm Beach Gardens, Florida 33418

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.*

STEPHEN S. MATHISON, P.A.

Signature of Registered Agent
Stephen S. Mathison, President

6. 7230 Winding Bay Lane

(Mailing address of initial designated office)

West Palm Beach, Florida 33412

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

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TALLAHASSEE, FLORIDA

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8. Name and business address of each general partner:

Name:

Business Address:

Eagle Capital Managment, LLC

7230 Winding Bay Lane

West Palm Beach, Florida 33418

108-99343

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 1st day of December, 2008.

Signature of each general partner:

Eagle Capital Management, LLC

Eagle Capital Management, LLC

By: 
John J. Delaney, Member

By: 
David C. Delaney, Member

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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TALLAHASSEE, FLORIDA

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