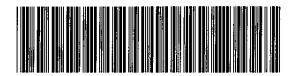
## A0900000012

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(==,,======,
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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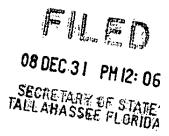
OB DEC 31 PH I2: 06



## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Burton Family Limited			
(Name of Florida Limited Partnershi	p or Limited Liability Limited Partnership)		
The enclosed Certificate of Limited Partne	rship and fees are submitted for filing.		
Please return all correspondence concerning	g this matter to:		
Kevin I. Downey			
(Contact Person)	-		
(Firm/Company)			
2631-B NW 41st Street			
(Address)			
Gainesville, Florida 32606			
(City, State and Zip Code)			
Par Combania Compatible and a state of the s	Man alasa salla		
For further information concerning this ma	•		
Kevin I. Downey	_at (_352) 373-4554		
(Name of Contact Person)	(Area Code and Daytime Telephone Number)		
Enclosed is a check for the following amou	nt:		
\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)  \$2 \$1,008.75 Filing Fees and Certificate of Status	\$1,052.50 Filing Fees S1,061.25 Filing Fees, and Certified Copy Certified Copy, and Certificate of Status		
STREET ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327		
2661 Executive Center Circle	Tallahassee, FL 32314		
Tallahassee, FL 32301	· ·		
CR2E030 (01/06)			





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

1 Burton 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.
2.4110 Highland Park Circle
(Street address of initial designated office)
Lutz, Florida 33558
3. Steven Burton
(Name of Registered Agent for Service of Process)
<sub>4.</sub> 4110 Highland Park Circle
(Florida street address for Registered Agent)
Lutz, Florida 33558
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
<sub>6.</sub> 4110 Highland Park Circle
(Mailing address of initial designated office)
Lutz, Florida 33558
7. If limited partnership elects to be a limited liability limited partnership, check box

Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Fi \$52.50 \$8.75 Page 2 of 2	ling Fee and \$35 Registered Ag	ECKETARY LL AHASSE	)8 DEC 31 PH 12: 06	
Signature of each general partner:		·	≥ ce	_	
•	of December	, 2008	_·		
(Effective date cannot be prior to no filed by the Florida Department of L		s after the date the docum	ent is		
9. Effective date, if other than the date of	filing: December	J6 , 2008	·		
•					
	Lutz, F	lorida 33558	<del></del>		
Susan Burton	4110 H	4110 Highland Park Circle			
	Lutz, F	lorida 33558			
Steven Burton	4110 H	ighland Park Circle	!		
8. Name and business address of ex Name:	ach general partner: Business				