

A09000000103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

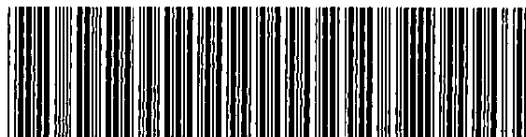
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/10/09--01036--016 **1008.75

SECRETARY OF STATE
TALLENHASSEE, FLORIDA

09 FEB 10 PM 12:25

FILED

S. HAWKES

FEB 12 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Close Construction, 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:

Thomas C. Close

(Contact Person)

Close Construction, Inc.

(Firm/Company)

301 N.W. 4th Avenue

(Address)

Okeechobee, FL 34972

(City, State and Zip Code)

For further information concerning this matter, please call:

Thomas C. Close

(Name of Contact Person)

at (863) 467-0831

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$1,000.00 Filing Fees
(\$965 Filing Fee and
\$35 Registered Agent
Fee) | <input checked="" 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

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

FILED
09 FEB 10 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Close Construction, 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. 301 N.W. 4th Avenue

(Street address of initial designated office)

Okeechobee, FL 34972

3. Thomas C. Close

(Name of Registered Agent for Service of Process)

4. 301 N.W. 4th Avenue

(Florida street address for Registered Agent)

Okeechobee, FL 34972

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. 301 N.W. 4th Avenue

(Mailing address of initial designated office)

Okeechobee, FL 34972

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

8. Name and business address of each general partner:

Name:

Business Address:

Close Construction, Inc.

301 N.W. 4th Avenue

P93000040356

Okeechobee, FL 34972

Cliff's Trucking, Inc.

3100 Fairlane Farms Road

595006

Wellington, FL 33414

09 FEB 10 PM 12:25
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 6th day of February, 2009.

Signature of each general partner:

Thomas C. Close

Thomas C. Close for Close
Construction, Inc.

Bill Lakeman

Bill Lakeman for Cliff's
Trucking, Inc.

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75