

A 09000000801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

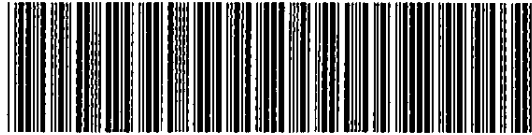
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

OK to Type in  
Certificate of LP per  
Customer.

Office Use Only



200157223152

06/29/09--01029--017 \*\*1000.00

FILED  
09 NOV 19 PM 12:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. HAWKES  
AUG 17 2009  
EXAMINER

S. HAWKES  
JUL 2 - 2009  
EXAMINER

W09-31172



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 18, 2009

STEPHEN M CARLISLE, P.L.  
212 SOUTHEAST 8TH STREET SUITE 103  
FORT LAUDERDALE, FL 33316

SUBJECT: PAYNE FAMILY, LTD  
Ref. Number: W09000031172

We have received your document for PAYNE FAMILY, LTD and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

After talking with you I found other problems with your application along with we do not file the limited partnership agreement.

We are enclosing the proper form(s) with instructions for your convenience.

The registered agent must sign accepting the designation.

We have received your document for PAYNE FAMILY, LTD and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 7, 2009

STEPHEN M CARLISLE, P.L.  
212 SOUTHEAST 8TH STREET SUITE 103  
FORT LAUDERDALE, FL 33316

SUBJECT: PAYNE FAMILY, LTD  
Ref. Number: W09000031172

We have received your document for PAYNE FAMILY, LTD and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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) 245-6955.

Suzanne Hawkes  
Regulatory Specialist II

Letter Number: 509A00023079

# Stephen M. Carlisle, P.L.

ATTORNEY AT LAW  
Admitted in State and Federal Courts

**212 Southeast 8<sup>th</sup> Street**  
**Suite 103**  
**FORT LAUDERDALE, FLORIDA 33316**  
**[www.FloridaEntertainmentAttorney.com](http://www.FloridaEntertainmentAttorney.com)**

**Telephone: (954) 764-4000**  
**Fax: (954) 764-4092**  
**E-Mail: [smcarlisle@aol.com](mailto:smcarlisle@aol.com)**

Stephen M. Carlisle, P.L.

26 June 2009

Department of State  
Division of Corporation  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Payne Family Limited Partnership

To the Division,

Please find enclosed the following documents

- 1) Original Family Limited Partnership Agreement
- 2) Designation of Registered Agent
- 3) Check for \$1,000.00 for filing fee and designation of Registered Agent
- 4) Copy of Partnership Agreement

Please file the documents with your division, stamp the copy with the date of filing and return it to this office.

Please contact me if there are any questions or concerns.

Very truly yours,



Stephen M. Carlisle

# Stephen M. Carlisle, P.L.

ATTORNEY AT LAW  
Admitted in State and Federal Courts

**212 Southeast 8<sup>th</sup> Street**  
**Suite 103**  
**FORT LAUDERDALE, FLORIDA 33316**  
***www.FloridaEntertainmentAttorney.com***

**Telephone: (954) 764-4000**  
**Fax: (954) 764-4092**  
**E-Mail: *smcarlisle@aol.com***

Stephen M. Carlisle, P.L.

14 August 2009

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

ATTN: Suzanne Hawkes

Re: Payne Family, Ltd.

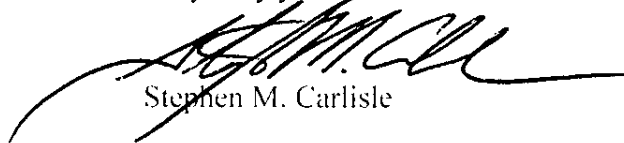
Dear Ms. Hawkes,

Pursuant to your letter dated July 7, 2009, please find enclosed a corrected copy of the Limited Family Partnership agreement, to which the name has been changed to avoid the confusion referenced in your letter.

Recall also our telephone conversation that you retained the original and instructed me to submit a corrected copy.

Please contact me if there are any other questions or concerns.

Very truly yours,



Stephen M. Carlisle

SMC/me  
Enclosures

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BARBARA PAYNE FAMILY 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:

JOHN K. PAYNE  
Contact Person

PAYNE FAMILY HOLDINGS LLC  
Firm/Company

1600 WEST LAKE DRIVE  
Address

Fort Lauderdale, Florida 33311  
City, State and Zip Code

JKPAYNE@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN K. PAYNE at (954) 522-0916  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

PREVIOUSLY SENT  
☒ \$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

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

1. BARBARA PAYNE FAMILY 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.P.,  
or LLLP.

2. 1600 WEST LAKE DRIVE  
(Street address of initial designated office)

FT. LAUDERDALE, FL 33316

3. JOHN K. PAYNE  
(Name of Registered Agent for Service of Process)

4. 1600 WEST LAKE DRIVE  
(Florida street address for Registered Agent)

FT. LAUDERDALE, FL 33316

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. 1600 WEST LAKE DRIVE  
(Mailing address of initial designated office)

FT. LAUDERDALE, FL 33316

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

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TALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

PAYNE FAMILY HOLDINGS LLC 1600 WEST LAKE DRIVE  
FT. LAUDERDALE, FL 33316

FILED  
09 NOV 19 PM 2:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

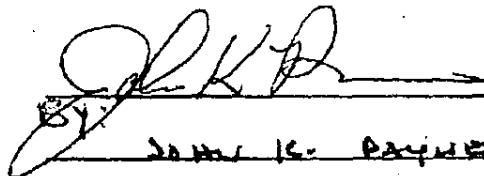
9. Effective date, if other than the date of filing: \_\_\_\_\_

(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 30 day of OCTOBER, 2009.

Signature of each general partner:

PAYNE FAMILY HOLDINGS LLC



JAMES K. PAYNE

MANAGER

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75