

DEC 23 2009 12:00 PM
Division of Corporations

JONES FOSTER JOHNSTON & STUBBS
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : JONES, FOSTER, JOHNSTON & STUBBS, P.A.
Account Number : 076077003231
Phone : (561) 650-0471
Fax Number : (561) 650-0431

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LP/LLLP
E AND L KING LIMITED LIABILITY LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$1,052.50

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EXAMINER

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TALLAHASSEE, FLORIDA

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JONES FOSTER JOHNSTON & STUBBS

NO. 051 P. 2/4

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E AND L KING LIMITED LIABILITY LIMITED PARTNERSHIP
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:

THORNTON M. HENRY, ESQ.

Contact Person

JONES FOSTER JOHNSTON & STUBBS, P.A.

Firm/Company

505 S. FLAGLER DRIVE, SUITE 1100

Address

WEST PALM BEACH, FLORIDA, 33401

City, State and Zip Code

DPAYTON@JONES-FOSTER.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DOMINIQUE A. PAYTON, FRP ACP at (561) 650-0427

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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

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TALLAHASSEE, FLORIDA

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

1. E AND L KING LIMITED LIABILITY 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. 8244 NASHUA DRIVE
(Street address of initial designated office)

PALM BEACH GARDENS, FLORIDA 33418

3. JONES FOSTER SERVICE, LLC
(Name of Registered Agent for Service of Process)

4. 505 SOUTH FLAGLER DRIVE, SUITE 1100
(Florida street address for Registered Agent)

WEST PALM BEACH, FLORIDA 33401

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. 505 SOUTH FLAGLER DRIVE, SUITE 1100
(Mailing address of initial designated office)

WEST PALM BEACH, FLORIDA 33401

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:

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Name:

Business Address:

EDWARD F. KING

8244 NASHUA DRIVE

PALM BEACH GARDENS, FL 33408

LAURA B. KING

8244 NASHUA DRIVE

PALM BEACH GARDENS, FL 33408

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TALLAHASSEE, FLORIDA

FILED

9. Effective date, if other than the date of filing: UPON 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 2nd day of DECEMBER, 2009

Signature of each general partner:

Edward F. King
Laura B. King

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75