DOCU 1. Entity Nan	IMENT	# A1706	7					e e e e e e e e e e e e e e e e e e e			
HERITAGE PARK, LLLP							FILED				
Principal Plac	ce of Business		Mailing	Address			01	JUN -6	PH 12: 15	9	
				RITAGE PARK WA			SE	ORETARY OF	STATS		
DELRAY BEACH FL 33484 DELRAY BEACH FL							IAL	CRETARY OF LAHASSEE, F	LORIDA	84831 64844 64844	
			3. Mailing Address								
2. Principal F	Place of Busine	ess					 		í Biril Otbri Albit VII	(1	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRIT	E IN THIS SI	PACE		
City & State			City & State			4. FEI Number	FO 04407F0		Applied		
Zip Country		Country	Zip . C		Countr	try		59-2443758	٠ - ١	Not App 8.75 Addition	
·								of Status Desired	7	ee Required	
	6. Name	and Address of Current	Registered	Agent		Name	7. Name and	Address of New R	egistered A	gent	
SCHEMEL, ROBERT G. 5858 HERITAGE PARKWAY					~ -	~~Street Addres	s (P.O. Box Number	is Not Acceptable) ———		
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	BEACH'FL 33	MAA									
DELINAY B		701			-	0'1				1 =:- 0 - 1	
	e named entity	submits this statement fo			-		-	n, in the State of Flo		Zip Code	
. The above	Signature, typed o	submits this statement for printed name of registered agent a \$2,750,100.00	and title if applica	Amount of Capita	E: Registered al Contribu ate.	d office or regis Agent signature requirutions	red when reinstating)	11. MAKE CHEC	DATE K PAYABLE 1 SE SIDE FOR	TO DEPT. OF STA	
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the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am a General Partner of the limited partnership or ter p20, Florida Statute. Daytime Phone # SIGNATURE: Date