

A19000000533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

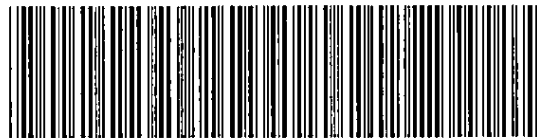
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



400337019504

400337019504
11/15/19--01001--000 **1000.00

FILED
19 NOV 14 AM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
NOV 15 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHP Family, LLLP

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:

Adriana Tatum

Contact Person

Coleman Talley LLP

Firm/Company

109 South Ashley Street

Address

Valdosta, GA 31601

City, State and Zip Code

davidmotley@motmanco.com

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

For further information concerning this matter, please call:

Adriana Tatum

at (229) 671-8227

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

CR2E030 (6/17)

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

FILED
19 NOV 14 AM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. CHP Family, LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., L.P., or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

2. 3102B North Oak Street Ext.

(Street address of initial designated office)

Valdosta, GA 31602

3. Jason P. Motley

(Name of Registered Agent for Service of Process)

4. 1431 Riverplace Blvd., Unit 3604

(Florida street address for Registered Agent)

Jacksonville, FL 32207

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. P.O. Box 1509

(Mailing address of initial designated office)

Valdosta, GA 31603

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:

Motmanco, Inc.

3102B North Oak Street Ext.

Valdosta, GA 31602

FILED
19 NOV 14 AM 12:10
STATE DEPT OF STATE
TALLAHASSEE, FLORIDA

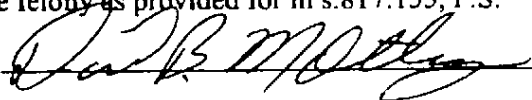
9. Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 12th day of November, 2019

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

_____, President of Motmanco, 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