## Recrestors Name Addres City/State/Zin Phone #

City/State/2	Zip Phone #		Office Use Only	
CORPORATION	NAME(S) & DOCUME	NT NUMBER(S),	(if known):	
1(Corp	oration Name)	(Document #)		<del></del>
2	oration Name)	(Document #)		· · · · · · · · · · · · · · · · · · ·
3(Corp	oration Name)	(Document #)	40000331	 3304 <del></del> -8
4(Corp	oration Name)	(Document #)	40000331 -07/05/00- ***1758.8	-01079018 <del>0</del>
☐ Walk in	Pick up time	O	Certified Copy	- * * * - • •
Mail out	Will wait Ph	otocopy $\square$ C	Certificate of Status	
NEW FILINGS	AMENDMENTS			
Profit	Amendment		:	74 B
NonProfit	Resignation of R.A., C	Officer/Director		
Limited Liability	Change of Registered	Agent		
Domestication	Dissolution/Withdraw	al		FILED -7 AN
Other	Merger			FILED  OO JUL -7 AM 9: 05  SECRETARY OF STATE ALLAHASSEE, FLORID
OTHER FILINGS	REGISTRATI	ON/		om on
Annual Report	QUALIFICAT			-0
Fictitious Name	Foreign		FF \$1	756.
Name Reservation	Limited Partnership		•	
A Table & County To the County	Reinstatement			
	Trademark			
	Other			-

Examiner's Initials



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 5, 2000

PADDOCK CLUB LAKELAND, A LIMITED PARTNERSHIP 6584 POPLAR AVE SUITE 340 MEMPHIS, TN 38138

SUBJECT: PADDOCK CLUB LAKELAND, A LIMITED PARTNERSHIP

Ref. Number: A29124

We have received your document for PADDOCK CLUB LAKELAND, A LIMITED PARTNERSHIP and check(s) totaling \$526.25. However, your check(s) and document are being returned for the following:

You have indicated in block 10 or 7b on the document that the contributions of the limited partners have gone beyond what we currently have on file. A supplemental affidavit must be filed pursuant to chapter 620, Florida Statutes. The filing fee is based on the additional amount of contributions calculated at a rate of \$7 per \$1000 with a minimum filing fee of \$52.50 and a maximum filing fee of \$1750.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 400A00031467

## SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

The undersigned general partners of <u>Yadd</u>	ock Gub L	the range		
	a (an)	Ceorgia		تقدر
Limited Partnership, executed this supplement	tal affidavit filed p	ursuant to section 620	.176,	
Florida Statutes. The total amount of the cap	ital contributions of	f the limited partners t	that is	
allocated for the purpose of transacting busin	ess in Florida is: \$	00. <u>PTP,450,66</u>		
Signed this \\alpha \day of \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		, 19 <sup>l</sup> 2000	•	-L
FURTHER AFFLANT SAYETH NOT.				
Under penalties of perjury I declare that I hat the best of my knowledge and belief.	ve read the foregoi	ng and that the facts a	re true, to	
Ger	neral Partner		SECRE	
<u>lestio</u> ho	4		-7 AM 9: 05 TARY OF STATE ASSEE/FLORIG	FILED

FEES:

\$7 per \$1,000 based on the additional contributions (Minimum \$52.50 - Maximum \$1,750.00)

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314