## A 31258

(Re	equestor's Name)	<u></u>
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #	)
PICK-UP	☐ WAIT	MAIL .
(Bı	usiness Entity Name)	)
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: HUGHES INVESTMENT PARTNERSHIP, LTD, (Name of Limited Partnership)

The enclosed Supplemental Affidavit and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL HUGHES
(Name of Person)

MARCO IS LAND, FLORIDA
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL HUGHES at (239) 394-1231
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section **Division of Corporations** 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRESS:** Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

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

The undersigned general partners of
HUGHES INVESTMENT PARTNERSHIP, LTD. ,a
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112, Florida Statutes.
The total amount of the capital contributions of the limited partners is: \$ 14, 405,740.45
This 31 day of DECKHBER, 2004.
FURTHER AFFIANT SAYETH NOT.
Under penalties of perjury, I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.
General Partner(s)  General Partner(s)
muchael L. Hagher, Sor.
Fees: \$7 per \$1000, based on additional

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

contributions

Minimum \$ 52.50 Maximum \$1750.00