1000063 Address City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) ****901.85 (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time Walk in Photocopy Certificate of Status Mail out Will wait AMENDMENTS NEW FIEINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger REGISTRATION OTHER FILINGS QUALIFICATION: Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement FF \$ 901.85 Trademark Other

Examiner's Initials

CR2E031(1/95)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 18, 2000

DEGUZMAN FAMILY LIMITED PARTNERSHIP 3502 PERRY ST. TAMPA, FL 33603

SUBJECT: DEGUZMAN FAMILY LIMITED PARTNERSHIP

Ref. Number: A95000000063

We have received your document for DEGUZMAN FAMILY LIMITED PARTNERSHIP and check(s) totaling \$1026.25. However, your check(s) and document are being returned for the following:

The fee to file the supplemental affidavit is \$901.85 and the fee to file the annual report/uniform business report is \$1026.25. The total fee due for both filings is \$1928.10. Please return the supplemental affidavit and the annual report/uniform business report together with the appropriate fee.

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: 000A00054585

OO MOV 13 PM 5: OO SECRETARY OF STATE

Division of Comparations P.O. BOY 6327 Tallahassee Florida 32314



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 31, 2000

DEGUZMAN FAMILY LIMITED PARTNERSHIP 3502 PERRY STREET TAMPA, FL 33603

SUBJECT: DEGUZMAN FAMILY LIMITED PARTNERSHIP

Ref. Number: A95000000063

We have received your document for DEGUZMAN FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1928.10. However, the enclosed document has not been filed and is being returned for the following correction(s):

The supplemental affidavit must be filled out completely and signed by a general partner.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline Document Specialist

Letter Number: 000A00056531

FILED

ON NOV 13 PM 5: 00

SECRETARY OF STATE
SECRETARY OF STATE
OF NAMES OF STATE
O

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

The undersigned general partners of Dequeman Family Limited
Partnersh: p ,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: $\$ 1792/62$
This 13th day of November, 19-2000.
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)
a general partner
Fros:

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

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\$7 per \$1000, based on additional contributions

Minimum \$ 52.50 Maximum \$1750.00