

W9500005982

LAW OFFICES
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Attorneys and Counselors At Law

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Reply To: Cocoa

Mariner Square
Suite 302
96 Willard Street
Cocoa, Florida 32922-7998
Telephone (407) 639-1320
Fax (407) 639-6690

Imperial Plaza
Suite 400
6767 N. Wickham Road
Melbourne, Florida 32940
Telephone (407) 259-6611
Fax (407) 259-6624

* (Admitted in TX & GA only)

March 20, 1995

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
ATTN: Diane Cushing

RE: Matthew Gillio Enterprises, Ltd.

Dear Ms. Cushing:

Enclosed for filing is the original and one copy of the affidavit and certificate of limited partnership for the above-captioned limited partnership. We made the correction regarding the registered agent designation that you addressed in your letter dated March 17, 1995, and a copy of your letter is enclosed herein as you requested.

Thank you for your attention.

Sincerely,



David M. Presnick

signed in his absence to avoid delay

/paf
Enclosures

cc: Gray and Matthew Gillio



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

March 17, 1995

DAVIS M. PRESNICK
AMARI THERIAC & EISENMENGER, P.A.
96 WILLARD STREET, SUITE 302
COCOA, FL 32922-7998

SUBJECT: MATTHEW GILLIO ENTERPRISES, LTD.
Ref. Number: W95000005982

We have received your document for MATTHEW GILLIO ENTERPRISES, LTD. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person that you have listed in section 2 of the certificate (Gray Gillio) must sign the acceptance statement. You have Matthew Gillio signing as registered agent. Please make the proper correction.

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 (904) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 095A00012005

**CERTIFICATE OF LIMITED PARTNERSHIP
OF
MATTHEW GILLIO ENTERPRISES, LTD.**

The undersigned, desiring to form a limited partnership in accordance with the Florida Uniform Limited Partnership Act and being duly sworn does certify as follows:

1. The name of the Partnership is MATTHEW GILLIO ENTERPRISES, LTD.

2. The principal place of business of the Partnership is located at 2809 Jacana Court, Longwood, Florida 32779. The name of the registered agent of the Partnership at such address is Matthew Gillio.

3. The name and address of the sole general partner is, as follows:

Matthew Gillio
2809 Jacana Court
Longwood, Florida 32779

4. The mailing address of the Partnership is 2809 Jacana Court, Longwood, Florida 32779.

5. The Partnership's existence shall begin upon the issuance of a Certificate of Authority to do Business by the State of Florida and shall continue until 12:00 o'clock noon on December 31, 2025, unless sooner terminated pursuant to the Limited Partnership Agreement.

IN WITNESS WHEREOF, the undersigned executed this Certificate as the General Partner this 10 day of February, 1995.

Witnesses:

"GENERAL PARTNER"

[Signature]

Matthew Gillio
Matthew Gillio

[Signature]

STATE OF FLORIDA
COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this 10th day of February, 1995, by **Matthew Gillio**, who is personally known to me to have executed the foregoing instrument as the sole general partner, who has produced sufficient identification, and who did not take an oath. *Personally Known*



H. COLMAN CREDIT, III
MY COMMISSION NO. 216723 EXPIRES
JAN 22, 1999
BONDED THIRD TRUST FIDELITY, INC.

[Signature]
NOTARY PUBLIC

FILED
MAR 29 1995
11:35
SEMINOLE
FLORIDA

AFFIDAVIT

The undersigned, being a General Partner of MATTHEW GILLIO ENTERPRISES, LTD., a Florida limited partnership, hereby certifies that the limited partners of the Partnership will be contributing certain property to the Partnership, the value of which is \$1,000.00. A total of \$7,500.00 is anticipated.

Matthew M. Gillio
Matthew Gillio

STATE OF FLORIDA
COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this 10 day of February, 1995, by Matthew Gillio, who is personally known to me, who has produced sufficient identification, and who did take an oath.



H. COLEMAN GRANT, III
MY COMMISSION AS NOTARY PUBLIC EXPIRES
JULY 12, 1995
BOSTON TRUST AND SAVINGS BANK, INC.

H. Coleman Grant, III
NOTARY PUBLIC

**CERTIFICATE OF ACCEPTANCE OF REGISTERED
AGENT AND STREET ADDRESS FOR
SERVICE OF PROCESS FOR
MATTHEW GILLIO ENTERPRISES, LTD.**

Pursuant to Section 48.061, Florida Statutes, I hereby accept
the foregoing designation as registered agent of MATTHEW GILLIO
ENTERPRISES, LTD. for service of process within the State of
Florida at 2809 Jacana Court, Longwood, Florida 32779



H. COLEMAN GRANT, III
MY COMMISSION EXPIRES
JULY 17, 1995
BORNED THAT THEY HAVE INSURANCE, INC.

Matthew M. Gillio
Matthew Gillio

State Florida
County Orange

Personally Known Matthew Gillio
Feb 10 1995 H. Coleman Grant, III



H. COLEMAN GRANT, III
MY COMMISSION EXPIRES
JULY 17, 1995
BORNED THAT THEY HAVE INSURANCE, INC.

FILED
155 MAR 29 AM 11:35
FILED

Signed before
H. Coleman Grant, III

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Mathias
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 DEC 18 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership
MATTHEW GILLIO ENTERPRISES, LTD.
1a. DOCUMENT #
A95000000492
96-AR
CM

Mailing Address
**2009 JACANA COURT
LONGWOOD FL 32779**
Principal Office Address
**2009 JACANA COURT
LONGWOOD FL 32779**

If above addresses are incorrect in any way, list through this section the correct information and enter correct address in Box 2 and/or 2a
3. Date Form or Registered to Discontinue in
FLORIDA 03/29/1995
3a. Date of Last Report
4. State or Country of Formation
FL

5a. Capital Contributions as Stated
on Record
\$7,500.00
5b. Amount of Capital Contributions in
FLORIDA to Date
6. FEI Number
59-3292125

7. CERTIFICATE OF STATUS REQUIRED
Applied Fee
Not Applicable
\$0.75 Additional Fee required
for a Certificate of Status
8. FEES: 1) Filing Fee. Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2) Supplemental Fee. \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$101.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent
**GILLIO, MATTHEW
2809 JACANA COURT
LONGWOOD FL 32779**

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City
FL Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or regulated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
GILLIO, MATTHEW	2809 JACANA COURT	LONGWOOD FL 32779	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(1)(b), in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE

Matthew M. Gillio

DATE

12-13-95

Typed or Printed Name of General Partner Signing Form

MATTHEW M. GILLIO

Telephone Number

407-333-9161