

A95000001488

CARLTON FIELDS

(Requestor's Name)

(Address)

Nancy Huid
224-1585

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

95 OCT -5 PM 9:16

RECEIVED
SECRETARY'S
OFFICE

A95000001488

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. LOVEJOY ROAD-WAREHOUSE-PROPERTY, LTD.
(Corporation Name) (Document #)
2. MONTGOMERY CIRCLE-WAREHOUSE-PROPERTY, LTD.
(Corporation Name) (Document #)
3. HUB WAREHOUSE PROPERTIES, LTD. R4500000294
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 10/5 4:00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A. Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

200001501488
10/11/95-01127-013
***1846.35 ***1846.35
C. TAX
FILING
R. AGENT FEE
C. COPY
TOTAL
BANK
BALANCE DUE
FUND

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP

THIS CERTIFICATE is made this 3rd day of October, 1995, by LBP WAREHOUSE MANAGEMENT, INC., a Florida corporation, which is the sole general partner of HUB WAREHOUSE PROPERTIES, LTD. (the "Partnership"). The undersigned certifies as follows:

1. The name of the limited partnership is Hub Warehouse Properties, Ltd.
2. The address of the office required to be maintained by the Partnership in Florida pursuant to Section 620.105 of the Florida Statutes is 3335 Chantarene Drive, Pensacola, Florida 32507, and the name and address of the agent for service of process is Lewis Bear Pollak, Sr., 3335 Chantarene Drive, Pensacola, Florida 32507.
3. The name of the sole general partner of the Partnership is LBP Warehouse Management, Inc., and its business address is 3335 Chantarene Drive, Pensacola, Florida 32507.
4. The mailing address of the Partnership is 3335 Chantarene Drive, Pensacola, Florida 32507.
5. The latest date upon which the Partnership is to dissolve is December 31, 2030.
6. This Certificate of Limited Partnership is made in accordance with Section 620.108 of the Florida Statutes.

**LBP WAREHOUSE MANAGEMENT
INC., a Florida corporation**

By: Lewis Bear Pollak, Sr.
Its: President

95 OCT -5
H 9: 14
SECRET
NO FOREIGN DISSEM
NO UNCLASSIFIED
NO UNCLASSIFIED

195000075458

AFFIDAVIT

**STATE OF FLORIDA
COUNTY OF ESCAMBIA**

95 OCT -5 AM 9:14
SECRETARY OF STATE
DIVISION OF RECORDS

BEFORE ME, the undersigned authority, personally appeared Lewis Bear Pollak, Sr., who, being by me first duly sworn, deposes and says:

1. I am the secretary of LBP Warehouse Management, Inc., a Florida corporation, which is the sole general partner of Hub Warehouse Properties, Ltd., a Florida limited partnership (the "Partnership"), and I am duly authorized to execute this affidavit on behalf of the Partnership.
2. The amount of the actual capital contribution of the limited partners to the Partnership is \$2,405,000.00, which is the total amount anticipated to be contributed by the limited partners.
3. This affidavit is made in compliance with Section 620.108(1) of the Florida Statutes.

Lewis Bear Pollak, Sr.
Lewis Bear Pollak, Sr.

SWORN TO AND SUBSCRIBED BEFORE ME this 3rd day of October, 1995, by Lewis Bear Pollak, Sr., as secretary of LBP Warehouse Management, Inc., the sole general partner of Hub Warehouse Properties, Ltd., on behalf of the Partnership. Mr. Pollak is personally known to me.

Catherine G. Barger
(Signature)
Name: Catherine G. Barger
(Legibly Printed)

(AFFIX OFFICIAL SEAL)

CATHERINE G. BARGER
"Notary Public-State of FL"
Comm. Exp. June 28, 1999
Comm. No. CC 476988

ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent to accept service of process for Hub Warehouse Properties, Ltd., a Florida limited partnership, at the place designated in the attached Certificate of Limited Partnership, the undersigned hereby accepts the appointment as Registered Agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and the undersigned is familiar with and accepts the obligations of my position as registered agent.

Dated this 3rd day of October, 1995.



Lewis Bear Pollak, Sr.

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 OCT -5 AM 9:14

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

A9500001488

FILED

95 DEC 27 PM 12:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. **Document #**
A95 00000 1488

HUB WAREHOUSE PROPERTIES, LTD.

DO NOT WRITE IN THIS SPACE

2. **New Mailing Address, if Applicable**
Mailing Address: 3335 Chantarene Drive
Pensacola, Florida 32507
City, State & Zip: 3335 Chantarene Drive
Pensacola, Florida 32507

2a. **New Principal Office Address, if Applicable**
Principal Office Address: 3335 Chantarene Drive
Pensacola, Florida 32507
City, State & Zip: 3335 Chantarene Drive
Pensacola, Florida 32507

3. **Date Formed or Registered in (Do) Business in**
FLORIDA 10/05/95
3a. **Date of Last Report**
10/05/95
4. **State or Country of Formation**
FLORIDA
5. **Capital Contributions as Shown on Record**
\$2,405,000
5b. **Amount of Capital Contributions in FLORIDA as of**
\$2,405,000
6. **FEET Number**
59-3339844

7. **CERTIFICATE OF STATUS REQUIRED**
\$8.75 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 5a or 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 \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$376.25 (\$437.50 + \$138.75). Note: If the amount entered in 5a is greater than amount entered in 5b, 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**
Lewis Bear Pollak, Sr.
3335 Chantarene Drive
Pensacola, Florida 32507

10. **If changed, new Registered Agent/Office**
Name: _____
Street Address (P.O. Box Number is Not Acceptable): _____
City, State & Zip: _____
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 registered 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
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. **Names of General Partner(s)**
LBP WAREHOUSE MANAGEMENT, INC.
11a. **Address of Each General Partner (Do NOT Use Post Office Box Numbers)**
3335 CHANTARENE DRIVE
11b. **City, State & Zip Code**
PENSACOLA, FL 32507
11c. **Registration/Document Number**
P95 0000 75958

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)(a), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(a) in the event that the information supplied is deemed exempt from public access. I further certify that the information was stated 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, the owner or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE *Lewis Bear Pollak*

DATE 12/26/95

Printed or Printed Name of General Partner Signing Form

Telephone Number

CR2E003 (6/95)