

A95000001698

J. W. Dismuke

Requester's Name

P.O. Box 1385

Address

Haines City, FL 33845

City/State/Zip

Phone #

Office Use Only

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

1. _____ (Corporation Name) _____ (Document #) 12/30/98
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

90 DEC 30 AM 11:32

SECRET
DIVISION OF REVENUE

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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-02/12/99-01070--006

*****52.50 *****52.50

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 13, 1999

DISMUKE FAMILY LIMITED PARTNERSHIP
P. O. BOX 1385
HAINES CITY, FL 33844

SUBJECT: DISMUKE FAMILY LIMITED PARTNERSHIP
Ref. Number: A95000001698

We have received your document for DISMUKE FAMILY LIMITED PARTNERSHIP, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$52.50.

The fee to file the supplemental affidavit will be based on the increase at a rate of \$7 per \$1000, with a minimum filing fee of \$52.50 and maximum filing fee of \$1750. The fee to file a supplemental affidavit decreasing the contributions is \$52.50.

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) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 499A00001350



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

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

The undersigned general partners of Dismuke Family Limited
Partnership, 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: \$ 442,955.00

This 23rd day of December, 19 98

FURTHER AFFLIANT 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)

J. N. Dismuke
by Ruth J. Dismuke POA

FEES:

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

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RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA