

Thomas R. McKeon

A9500000 2022

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 34314

December 6, 1995

Re: T.McK. Limited Partnership

600001659656
-12/12/95--01051--001
*****96.25 *****96.25

Dear Sir or Madam,

The enclosed certificate of limited partnership and affidavit of capital contributions was filled out by myself, the registered agent for the limited partnership. The enclosed check in the amount of \$96.25 is for fee to file, fee for designated registered agent and for an additional certificate. The acknowledgement should be addressed to:

11122 137th Street North
Largo, Florida 34644-4135

I may be reached at (813) 596-5967 or 596-9335, if you may have any question

Thank you,

FILED
95 DEC 22 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

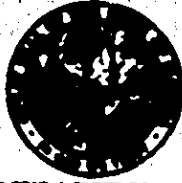
Name	12/12/95
Availability	dec
Document Examiner	dec
Updater	dec
Updater Verifier	dec
Acknowledgement	dec
W. P. Verifier	---

11122 137th Street North
Largo, Florida 34644-4135
Telephone & Fax: (813) 596-9335

22
00-000112

W950000 24370

A9500000 2022



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 14, 1995

THOMAS R. MCKEON
11122 137TH STREET NORTH
LARGO, FL 34644-4135

SUBJECT: T.MCK. LIMITED PARTNERSHIP
Ref. Number: W95000024370

We have received your document for T.MCK. LIMITED PARTNERSHIP and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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: 895A00054088

CERTIFICATE OF LIMITED PARTNERSHIP

1. T.McK. Limited Partnership
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd", or "Limited Partnership")

2. 11122 137th Street North, Largo, Florida 34644
(Business address of Limited Partnership)

3. Thomas R. McKeon
(Name of Registered Agent for Service of Process)

4. 11122 137th Street North, Largo, Florida 34644
(Florida street address for Registered Agent)

5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)

6. 11122 137th Street North, Largo, Florida 34644
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 2020

Names of general partners:	Street address:
<u>Theresa M. McKeon</u>	<u>11122 137th Street North, Largo, FL. 34644</u>
<u>Thomas R. McKeon</u>	<u>11122 137th Street North, Largo, FL. 34644</u>

Under penalties of perjury we declare that we have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 6th day of December, 1995.

Signature of all general partners:


General Partner


General Partner

FILED
95 DEC 22 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

*The undersigned constituting all of the general partners of T.McK. Limited Partnership,
a Florida Limited Partnership, certify:*

The amount of capital contributions to date of the limited partners is \$100.00 each.

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 1,000.00.

Signed this 6th day of December, 1995 .

FURTHER AFFIANT SAYETH NOT.

*Under the penalties of perjury we declare that we have read the foregoing and know the contents
thereof and that the facts stated herein are true and correct.*

FILED
95 DEC 22 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


General Partner


General Partner

FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$300 PENALTY FEE

A9500002022

FILED
96 JAN 11 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership
T.McK. LIMITED PARTNERSHIP

1a. DOCUMENT #
A9500002022

96-AR
CM

Mailing Address Principal Office Address
11122 137th Street North
Largo, Florida 34644-4135

3. Date Formed or Registered to Do Business in FLORIDA **12/6/95** **3a. Date of Last Report** **12/6/95** **4. State or Country of Formation** **Florida**

5a. Capital Contributions as Shown on Record **\$200.00** **5b. Amount of Capital Contributions in FLORIDA to date** **\$200.00** **6. FEI Number** Applied For Not Applicable

2. New Mailing Address if Applicable
 Suite Apt # etc **600001688646**
-01/12/96--01091--002
 City State & Zip *****191.25 ***191.25**

2a. New Principal Office Address if Applicable
 Suite Apt # etc
 City State & Zip

6. 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 \$191.25 (\$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
Thomas R. McKeon
11122 137th Street North
Largo, Florida 34644-4135

10. If changed from 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 620.197 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) *Thomas R. McKeon* DATE **1/7/96**

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

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
Thomas R. McKeon	11122 137th Street N.	Largo, FL. 34644	
Theresa M. McKeon	11122 137th Street N.	Largo, FL. 34644	

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)(k) Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) 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 *Thomas R. McKeon* DATE **1/7/96**
 Typed or Printed Name of General Partner Signing Form **Thomas R. McKeon, GENERAL PARTNER** Telephone Number **(813) 596-5967**

CR2E003 (6/95)

A95000002022

Theresa /McKeon, Inc.
 1122 137th Street N.
 Largo, Florida 33774-45135
 City/State/Zip Phone #

200002090272--0
 -02/18/97-01024-004
 *****2.50 *****2.50

Office Use Only

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

1. _____ (Corporation Name) (Document #) _____
2. _____ (Corporation Name) (Document #) _____
3. _____ (Corporation Name) (Document #) _____
4. _____ (Corporation Name) (Document #) _____

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

FILED
TALLAHASSEE, FLORIDA

97 FEB 18 PM 12:15

FILED

NEW FILINGS	
Profit	
NonProfit	
Limited Liability	
Domestication	

AMENDMENTS	
X Amendment	Cancellation
Resignation of R.A., Officer/ Director	
Change of Registered Agent	
Dissolution/Withdrawal	
Merger	

OTHER FILINGS	
Name	Other
Annual Report	DCC
Fictitious Name	DCC
Name Reservation	DCC
Acknowledgement	DCC
Over	DCC

REGISTRATION/ QUALIFICATION	
Foreign	
Limited Partnership	
Reinstatement	
Trademark	
Other	

Examiner's Initials	
---------------------	--

**CERTIFICATE OF CANCELLATION
FOR**

T. MCK. LIMITED PARTNERSHIP
(insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.113, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on DECEMBER 22, 1995, hereby submits this certificate of cancellation.

FIRST: Reason for cancellation: (State why partnership is submitting cancellation)

THE LIMITED PARTNERSHIP HAS BEEN DISSOLVED.

SECOND: This certificate of cancellation shall be effective at the time of its filing with the Florida Department of State.

THIRD: Signatures of all general partners:

THOMAS R. MCKEON - Thomas R. McKean
THERESA M. MCKEON - Theresa M. McKean

FILED
97 FEB 18 PM 12:15
TALLAHASSEE, FLA