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AMERILAWYER®

(Requestor's Name)

343 ALMERIA AVENUE

(Address)

CORAL GABLES, FL 33134 - (305) 445-2700

(City, State, Zip)

(Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 FEB -8 PM 3:34

OFFICE USE ONLY

~~OVERPAID~~ 3.50
FILING 52.50
R. AGENT FEE 25.00
O. COPY 91.00
TOTAL 171.00
N. BANK
BALANCE DUE
REFUND

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

ATLANTIS ADVENTURE LIMITED PARTNERSHIP

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

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*****91.00 *****91.00

- ☒ Walk in ☐ Pick up time _____ ☐ 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

RECEIVED
96 FEB -8 AM 10:37
DIVISION OF CORPORATIONS

\$91.00 filing fee
2/8/96

Examiner's Initials BM

**CERTIFICATE OF LIMITED PARTNERSHIP OF
ATLANTIS ADVENTURE LIMITED PARTNERSHIP,
a Florida limited partnership**

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The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (1993), hereby states:

ARTICLE 1-NAME

The name of the Partnership is ATLANTIS ADVENTURE LIMITED PARTNERSHIP

ARTICLE 2-OFFICE ADDRESS

The address of the office of the Partnership is 310 16 Avenue North, Indian Rock Beach, Florida 34635.

ARTICLE 3-MAILING ADDRESS

The mailing address of the Partnership is Post Office Box 1049, Indian Rocks Beach, Florida 34634-1049.

ARTICLE 4-GENERAL PARTNERS

The name and business address of the general partners are Paul W. Sullivan and F. Tina Sullivan at 310 16 Avenue North, Indian Rocks Beach, Florida 34635.

ARTICLE 5-REGISTERED OFFICE AND REGISTERED AGENT

The initial address of registered office of this Partnership is The Law Firm of Lawrence J. Spiegel, Chartered doing business as AmeriLawyer®, located at 343 Almeria Avenue, Coral Gables, Florida 33134. The name and address of the registered agent of this Partnership is The Law Firm of Lawrence J. Spiegel, Chartered doing business as AmeriLawyer®, located at 343 Almeria Avenue, Coral Gables, Florida 33134.

ARTICLE 6-DISSOLUTION

The latest date upon which the Partnership shall dissolve is twenty years from the date of filing of this Certificate of Limited Partnership with the Florida Secretary of State.



The execution of this certificate by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed on behalf of the General Partners of ATLANTIS ADVENTURE LIMITED PARTNERSHIP this 7 February 1996.

GENERAL PARTNERS:

Paul W. Sullivan and F. Tina Sullivan



Natalia Utrera

Authorized Agent and Attorney at Law

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ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as statutory registered agent for ATLANTIS ADVENTURE LIMITED PARTNERSHIP, a Florida limited partnership (the "Partnership"), in the foregoing Certificate of Limited Partnership, We hereby agree to act in that capacity, and, on behalf of the Partnership, to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent. The Law Firm of Lawrence J. Spiegel, Chartered doing business as AmeriLawyer®, having a business office identical with the registered office of the Partnership name above, and having been designated as the Registered Agent in the above and foregoing Certificate of Limited Partnership, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

The Law Firm of Lawrence J. Spiegel,
Chartered doing business as
AmeriLawyer®

By: 

Natalia Utrera, Vice President



AFFIDAVIT OF CAPITAL CONTRIBUTIONS

**STATE OF FLORIDA
COUNTY OF DADE**

BEFORE ME, the undersigned authority, personally appeared Natalia Utrera, Authorized Agent and Attorney at Law of Paul W. Sullivan, F. Tina Sullivan, the general partners of ATLANTIS ADVENTURE LIMITED PARTNERSHIP (the "Partnership"), who, upon being duly sworn, certified as follows:

1. The amount of capital contributions to the Partnership made by the limited partners is, in the aggregate, SEVEN THOUSAND FIVE HUNDRED DOLLARS AND NO CENTS (\$7,500.00).
2. At this time, it is not anticipated that additional capital contributions will be made by the limited partners.

Under penalties of perjury I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.


Natalia Utrera, Esquire

Dated this 7 February 1996

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared Natalia Utrera, known to me to be the person who executed the foregoing Affidavit of Capital Contributions, and she acknowledged to me and before me that she executed this Affidavit as Authorized Agent and Attorney at Law of Paul W. Sullivan and F. Tina Sullivan, General Partners of ATLANTIS ADVENTURE LIMITED PARTNERSHIP.

IN WITNESS WHEREOF, I have set my hand and affixed my official seal in the State and County aforesaid, this 7 February 1996.


NOTARY PUBLIC, State of Florida at Large

(SEAL)



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DIVISION
8 FEB 96
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