

A96000000842

Jack McCormack
Requestor's Name

P.O. Box 1970

Address

Chiefland, FL 32626

City/State/Zip

Phone #

FILED

96 APR 25 11 3 57

SECRET
INITIALS

Office Use Only

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

1. McCormack Limited Partnership II
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

400001802054
04/20/96 01117-001
****133.00 ****133.00

☐ 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 type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Name Availability	KWM
Document Examiner	KWM
Updater	KWM
Updater Verifier	KWM
Adviser	KWM
Witness	KWM

CERTIFICATE OF LIMITED PARTNERSHIP
OF

FILED

96 APR 29 PM 3 57

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

2. P. O. Box 1970, Chiefland, Florida 32644-1970
(The Business Address of Limited Partnership)

3. Jack McCormack
(Name of Registered Agent for Service of Process)

4. 316 N. W. 11th Ave., Chiefland, Florida 32626
(Florida Street Address for Registered Agent)

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

6. P. O. Box 1970, Chiefland, Florida 32644-1970
(The Mailing Address of the Limited Partnership.)

7. The latest date upon which the Limited Partnership is to be dissolved is April 26, 2010.

8. NAME OF GENERAL PARTNER(S)

SPECIFIC ADDRESS

Jack McCormack

316 NW 11th Ave., Chiefland, FL 32626
P. O. Box 1970, Chiefland, Florida 32644-1970

Signed this 26th day of April, 1996.

Signature of all general partners:

Jack M. Lormark
General Partner

General Partner

General Partner

General Partner

General Partner

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of

McGormack Limited Partnership II, a Florida Limited Partnership, certify as follows:

The amount of capital contributions to date of the limited partners is \$ 14,000.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 14,000.00.

This 26th day of April, 19 96.

FURTHER AFFIANT SAYETH NOT.

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

Jack McGormack
General Partner

General Partner

General Partner

General Partner

General Partner

General Partner