

A96000001116

Northern Atlantic, Ltd.
(Requestor's Name)

P.O. Box 439
(Address)

Palm City, FL 34991
(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

The undersigned general partners of Northern Atlantic, Ltd


_____, 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: \$ 570,000.00

This 24 day of April, 2003

FURTHER AFFIANT 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)

*President of
Proserve International
Inc*

Proserve International, Inc

PO BOX 439

Palm City, FL 34991

Fees:
\$7 per \$1000, based on additional contributions
Minimum \$ 52.50
Maximum \$1750.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE FLORIDA

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