

A96000001148

Requester's Name

Address

City/State/Zip

Phone #

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

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

800001867598  
-06/19/96--01099--024  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

6/14/96

# CERTIFICATE OF LIMITED PARTNERSHIP OF

1. James R. Brumble  
(Name of Limited Partnership; must contain a suffix such as "Limited",  
"Ltd.", or "Limited Partnership")

2. 1935 L. Howard Dr. St. Augustine, Fla. 32084  
(Business address of Limited Partnership)

3. James R. Brumble  
(Name of Registered Agent for Service of Process)

4. 1935 L. Howard Dr. St. Augustine, Fla. 32084  
(Florida street address for Registered Agent)

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

6. 1935 L. Howard Dr. St. Augustine, Fla. 32084  
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is Dec 31, 1999

8. Name of general partner(s):

Specific address:

James R. Brumble  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1935 L. Howard Dr. St. Augustine  
Fla. 32084  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed this 19<sup>th</sup> day of June, 19 98  
Signature of all general partners:

James R. Brumble  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

98 JUN 19 AM 11:53

## AFFIDAVIT OF CAPITAL CONTRIBUTIONS

The undersigned constituting all of the general partners of

Summit Lake Properties, a Florida Limited Partnership, certify.

The amount of capital contributions to date of the limited partners is \$ 300,000.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 300,000.

FURTHER AFFIANT SAYETH NOT.

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

James R. Bradburn  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

This 1st day of January, 19 70.