

A96000001840

TODD A. STRAZOY
Holland and Knight

(Requestor's Name)
315 South Calhoun Street Suite 600
(Address)
Tallahassee, Florida 32302
(City, State, Zip) (Phone #)

OFFICE USE ONLY

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATION
96 OCT -3 PM 2:30

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

1. Alden Family Limited Partnership
(Corporation Name) (Document #) 400001968064
-10/08/96--01124--015
2. _____
(Corporation Name) (Document #) ###1837.50 ###1837.50
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 1:00
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certified Copy
☐ Certificate of Status

RECEIVED
96 OCT -3 AM 11:15
DIVISION OF CORPORATION

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

G. TAX
FILING 1750.00
R. AGENT FEE 25.00
C. COPY 52.82
TOTAL 1837.50
N. BANK
BALANCE DUE
OFFICE

10/3/96

Examiner's Initials AK

CERTIFICATE OF LIMITED PARTNERSHIP

The undersigned sole general partner represents that it has formed a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act (the "Act"), and that it has executed this Certificate of Limited Partnership pursuant to the foregoing Act and states herein as follows:

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OCT-3 PM 2:31

I. Name

The name of the limited partnership is **Alden Family Limited Partnership.**

II. Records of the Partnership

The address of the office in Florida at which place the records of the Partnership shall be maintained is as follows:

12450 Indian Road
North Palm Beach, FL 33408

III. Registered Agent

The address of the registered office of the partnership and the name of the registered agent for service of process located at that office is as follows:

DeWitt C. Thompson
12450 Indian Road
North Palm Beach, FL 33408

IV. General Partner

The name and business address of the general partner of the partnership is as follows:

Alden Investments, Inc.
12450 Indian Road
North Palm Beach, FL 33408

89600006231

V. Mailing Address

The mailing address of the partnership is as follows:

12450 Indian Road
North Palm Beach, FL 33408

VI. Dissolution

The latest date on which the partnership is to dissolve is December 31, 2007.

WHEREFORE, the undersigned, the General Partner of the partnership, has executed this Certificate of Limited Partnership on September 12, 1998.

ALDEN INVESTMENTS, INC.,
a Florida corporation

By: Diana R. Thompson, President
Diana R. Thompson, President

FTL-207205

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20% COTTON RECYCLED

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DIVISION OF CORPORATIONS
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LIMITED PARTNERSHIP REGISTERED AGENT DESIGNATION

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 620.105, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT **ALDEN FAMILY LIMITED PARTNERSHIP**
WITH ITS PLACE OF BUSINESS AT **12450 Indian Road, North Palm Beach, FL**
HAS NAMED **DeWitt C. Thompson**
LOCATED AT **12450 Indian Road, North Palm Beach, FL 33408**
AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

ALDEN FAMILY LIMITED PARTNERSHIP

By: **Alden Investments, Inc., General Partner**

By: *Diana R. Thompson, President*
Diana R. Thompson, President

September 12, 1996

Having been named to accept Service of Process for the above stated Limited Partnership, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of section 620.192, Florida Statutes.

DeWitt C. Thompson
DeWitt C. Thompson

September 12, 1996

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Diana R. Thompson, President of Alden Investments, Inc., which is the sole general partner of Alden Family Limited Partnership, a Florida limited partnership (the "Partnership"), who, upon being sworn, certifies as follows:

1. The amount of the initial capital contribution of the limited partners of the Partnership is \$3,168,000.
2. The total amount of capital anticipated to be contributed by the limited partners of the Partnership is \$3,168,000.

This 12 day of September, 1996.

FURTHER AFFIANT SAYETH NOT.

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

ALDEN FAMILY LIMITED PARTNERSHIP

By: Alden Investments, Inc., a
Florida corporation, General Partner

By: Diana R. Thompson, President
Diana R. Thompson, President

STATE OF Tennessee

COUNTY OF Davidson

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgements in and for the state and county set forth above, personally appeared DIANA R. THOMPSON, on behalf of Alden Family Limited Partnership, known to me and known by 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 President of the general partner of said Alden Family Limited Partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid this 12th day of September, 1996.

Jeremy Jerry-Whelan
Notary Public
State of Tennessee

(Notarial Seal)

My Commission Expires: