

A96000002329

Capital Connection, Inc.
Requestor's Name

Address
Tallahassee, FL
City/State/Zip Phone #

FILED

96 DEC 16 PM 4: 19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

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

1. Timber Associates Limited Partnership
(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

500002035565--2
-12/20/96--01098--021
***1785.00 ***1785.00

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

December 16, 1996

CAPITAL CONNECTION, INC.

TALLAHASSEE, FL

SUBJECT: TIMBER ASSOCIATES LIMITED PARTNERSHIP
Ref. Number: W96000026346

We have received your document for **TIMBER ASSOCIATES LIMITED PARTNERSHIP** and check(s) totaling \$1785.00. However, your check(s) and document are being returned for the following:

Section 620.108, Florida Statutes, requires the certificate include the names and street addresses of the general partners.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6025.

Cathy A Mitchell
Corporate Specialist

Letter Number: 196A00055963

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**CERTIFICATE OF LIMITED PARTNERSHIP
OF THE
TIMBER ASSOCIATES LIMITED PARTNERSHIP**

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986), and Section 620.108 of the Florida Statutes, the undersigned, being the General Partners of the Timber Associates Limited Partnership, hereby duly execute and file with the Florida Secretary of State this Certificate of Limited Partnership.

1. The name of the limited partnership is: **Timber Associates Limited Partnership.**

2. The business address and the mailing address of the limited partnership is:

**Highway 349 North
Old Town, FL 32680**

3. The name of the registered agent for service and process required by Section 620.105 of the Florida Statutes is:

Joe H. Anderson, III

4. The Florida street address of the registered agent is:

**Highway 349 North
Old Town, FL 32680**

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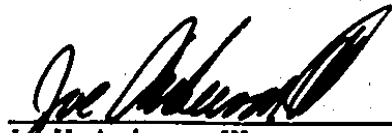
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5. Acceptance of Appointment of Registered Agent:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named the statutory registered agent of the Timber Associates

Limited Partnership, at the place designated in this Certificate of Limited Partnership of the Timber Associates Limited Partnership, I hereby accept such designation and confirm that I am familiar with and agree to accept the obligations imposed by Chapter 620.192 of the Florida Statutes and I agree to comply with the provisions of Florida Law relative to keeping the registered office open.


Joe H. Anderson, III,
Registered Agent
Dated: December 13, 1996

6. The names and business addresses of the general partners are as follows:

Joe H. Anderson, III
Highway 349 North
Old Town, Florida 32680

Douglas Marion Anderson
Highway 349 North
Old Town, Florida 32680

Cindy Darlene Childers
Highway 349 North
Old Town, Florida 32680

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TALLAHASSEE, FLORIDA

7. The latest date on which the limited partnership is to dissolve is **December 31,**
2026

IN WITNESS WHEREOF, the General Partners have executed the foregoing
Certificate of Limited Partnership on the 13 day of December, 1996 in
accordance with Section 620.114 of the Florida Statutes.


Joe H. Anderson, III


Douglas Marion Anderson


Cindy Darlene Childers

disk4:timber.cri

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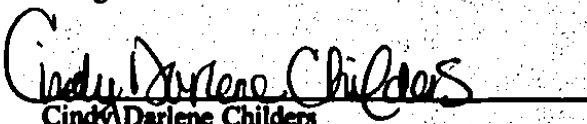
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BEFORE ME, the undersigned constituting the General Partners of the Timber Associates Limited Partnership, a Florida limited partnership, certify as follows:

1. The amount of capital contributions to date of the limited partners is: \$300.
2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals at least: \$1,500,000.


Joe H. Anderson, III


Douglas Marion Anderson


Cindy Darlene Childers

STATE OF FLORIDA)
COUNTY OF DIXIE) ss.:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

On the ____ day of _____, 1996 before me personally came JOE
I. ANDERSON, III, to me known and known to me to be the individual described in and
who executed the foregoing instrument, and duly acknowledged to me that he executed the
same as aforesaid.

Janet J. Gooding
Notary Public




JANET J. GOODING
NOTARY PUBLIC, STATE OF FLORIDA
My Commission Expires Mar. 24, 1998
Commission No. CC358969

STATE OF FLORIDA)
) ss.:
COUNTY OF DADE)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

On the ____ day of _____, 1996 before me personally came
DOUGLAS MARION ANDERSON, to me known and known to me to be the individual
described in and who executed the foregoing instrument, and duly acknowledged to me that
he executed the same as aforesaid.


Notary Public

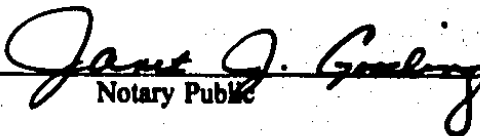


JANET J. GOODING
NOTARY PUBLIC, STATE OF FLORIDA
My Commission Expires Mar. 24, 1998
Commission No. CC358969

STATE OF FLORIDA)
) ss.:
COUNTY OF DIXIE)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

On the ____ day of _____, 1996 before me personally came
CINDY DARLENE CHILDERS, to me known and known to me to be the individual
described in and who executed the foregoing instrument, and duly acknowledged to me that
she executed the same as aforesaid.


Notary Public



JANET J. GOODING
NOTARY PUBLIC, STATE OF FLORIDA
My Commission Expires Mar. 24, 1998
Commission No. CC358969