

FILED

02 MAY -3 AM 9:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #	A97000000138
1. Entity Name	SHASAM-37, LTD.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address 4400 PGA Blvd.		DO NOT WRITE IN THIS SPACE	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 900		DUE BY MAY 1	
City & State		City & State Palm Beach Gardens, FL			
Zip	Country	Zip	Country	4. FEI Number 65-0719970	Applied For Not Applicable
				5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent		
Name	Richard G. Cherry	
Street Address (P.O. Box Number is Not Acceptable)	4400 PGA Blvd, Suite 900	
City	FL	Zip Code
Palm Beach Gardens		33410

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered owner and title if applicable.

9. Capital Contributions as Shown on record.	\$100.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		STREET ADDRESS	
DOCUMENT #	P97000004453	STREET ADDRESS	
NAME	Shasam-37, Inc.	CITY- ST- ZIP	
STREET ADDRESS	4400 PGA Blvd., Suite 900		
CITY- ST- ZIP	Palm Beach Gardens, FL 33410		
DOCUMENT #		STREET ADDRESS	
NAME		CITY- ST- ZIP	
STREET ADDRESS			
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STREET ADDRESS			
CITY- ST- ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

David Wilber, President of Shasam-37, Inc., General Partner

561 471 7767

Date: _____ Daytime Phone: _____

CR2E003B (12/01)