

00018905 MB

The seal of the State of Florida is a circular emblem. It features a central figure of a woman standing on a rocky shore, holding a torch aloft in her right hand and a scroll in her left. The scroll is inscribed with the word 'CONSTITUTION'. Above her, a palm tree stands prominently. The entire scene is set against a background of a rising sun over water. The outer border of the seal contains the text 'GREAT SEAL OF THE STATE OF FLORIDA' at the top and 'IN GOD WE TRUST' at the bottom.

FILED

03 MAY -5 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Mailing Address
4053 MAPLE ROAD
AMHERST NY 14226

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

DATE _____

10. Amount of Capital Contributions
in FLORIDA to date. \$ 1,359,509.00

**11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

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.

ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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)(i), 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

S. Stevens (P) Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date _____

Daytime Phone # _____

CH2E003 (10/02)

STAPLE CHECK HERE