

Whitehead Street Associates
Limited Partnership,
Attn: Harvey Server
Requestor's Name

529 Whitehead St.

Address

Key West, FL 33040

City/State/Zip

Phone #

100002376741--0
-12/18/97--01086--001
Office Use Only *****52.50 *****52.50

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

A97000001174

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JAN 30 PM 1:02

A97000001174

Examiner's Initials

dcc



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 23, 1997

WHITEHEAD STREET ASSOCIATES LIMITED PARTNERSHIP
ATTN: HARVEY SERVER
529 WHITEHEAD ST.
KEY WEST, FL 33040

SUBJECT: WHITEHEAD STREET ASSOCIATES LIMITED PARTNERSHIP I
Ref. Number: A97000001174

We have received your document for WHITEHEAD STREET ASSOCIATES LIMITED PARTNERSHIP I and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to our records your contributions of the limited partners is \$10,000.00. Are you trying to increase or decrease your contributions? The form you completed is for a new filing. If you wish to increase or decrease you will need to complete a supplemental affidavit.

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 (850) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 097A00060190



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP

The undersigned general partners of WHITEHEAD STREET ASSOCIATES
LIMITED PARTNERSHIP I, a

Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 12,000.00.

This 16TH day of DECEMBER, 19 97.

FURTHER AFFLIANT SAYETH NOT.

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

General Partner(s)

Harvey W. Server
HARVEY W. SERVER

FEES:

\$7 per \$1,000 based on the additional contributions
(Minimum \$52.50 - Maximum \$1,750.00)

INHSE20(3/95)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JAN 30 PM 02