

A9 7000001830



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

Smigiel Partners V, Ltd.

☐ Walk In

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☐ Photocopy

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☒ Certified Copy

☐ Certificate of Status

☐ Certificate of Good Standing

☐ ARTICLES ONLY

☐ ALL CHARTER DOCS

NEW FILINGS	
<input type="checkbox"/>	Profit
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<input type="checkbox"/>	Limited Liability
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<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 - Supp. Affidavit
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

☐ Certificate of FICTITIOUS NAME

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5/21/98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

April 24, 1998

UCC FILING & SEARCH

TALLAHASSEE, FL

SUBJECT: SMIGIEL PARTNERS V, LTD.
Ref. Number: A97000001830

We have received your document for SMIGIEL PARTNERS V, LTD. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Before this Supplemental Affidavit can be filed, the partnership will have to file an AMENDMENT changing the general partner to LEVITT-ANSCA RANCH PARTNERSHIP. The AMENDMENT is currently being handled by another filing company, but it hasn't been filed yet.

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) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 798A00022356

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98 MAY 21 AM 10:14
21

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**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR A FLORIDA LIMITED PARTNERSHIP**

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STATE OF FLORIDA)
)
COUNTY OF DELAWARE) SS:
)
)
COUNTY OF DELAWARE)

The undersigned general partners of SMIGIEL PARTNERS V, LTD., a Florida limited partnership, execute this supplemental affidavit filed pursuant to Section 620.112, Florida Statutes.

The total amount of the capital contributions of the limited partners is \$ 1,000. No additional contributions by the limited partners are anticipated.

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

LEVITT-ANSCA HAGEN RANCH
PARTNERSHIP, a Florida general partnership, its
sole general partner

By: Levitt Hagen Ranch, Inc., a Florida
corporation, general partner

By: [Signature]
Name: Jeffery Hoyos
Title: Senior Vice President

By: Anscas Homes of Florida, Inc., a Florida
corporation, general partner

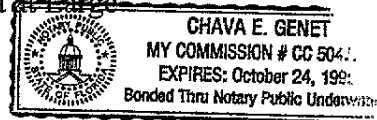
By: [Signature]
Name: CHARLES SCARDINO
Title: PRESIDENT

STATE OF FLORIDA)
)SS:
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 21st day of April, 1998, by Jeffery Hoyos, as Senior Vice President of Levitt Hagen Ranch, Inc., a Florida corporation, General Partner of Levitt-Ansca Hagen Ranch Partnership, a Florida general partnership, on behalf of the corporation and as an act of the partnership.

☒ Personally Known ☐ Produced Drivers License ☐ Produced: _____

Chava E. Genet
Print or Stamp Name: _____
Notary Public, State of Florida at Large
Commission No.: _____
My Commission Expires: _____



STATE OF FLORIDA)
)SS:
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 21st day of April, 1998, by Charles Scardine, as President of Ansca-Homes of Florida, Inc., a Florida corporation, General Partner of Levitt-Ansca Hagen Ranch Partnership, a Florida general partnership, on behalf of the corporation and as an act of the partnership.

☒ Personally Known ☐ Produced Drivers License ☐ Produced: _____

Chava E. Genet
Print or Stamp Name: _____
Notary Public, State of Florida at Large
Commission No.: _____
My Commission Expires: _____

