

A97000002051

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

FILED
SECRETARY OF CORPORATION
DIVISION OF CORPORATION
99 JAN 20 AM 11:01

500002753085-1

-01/25/99--01055--016

****154.00 ****154.00

GURP
CORAPCOWCH

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

1. The Sigourn Family, Limited Partnership #1
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. REINST WITH TH
(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

110-154

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

RECEIVED
99 JAN 19 PM 12:03
DIVISION OF CORPORATION

BK
1/20/99

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 19, 1999

FILINGS, INC.

TALLAHASSEE, FL

SUBJECT: THE SIGOUIN FAMILY LIMITED PARTNERSHIP #1
Ref. Number: A97000002051

We have received your document for THE SIGOUIN FAMILY LIMITED PARTNERSHIP #1 and check(s) totaling \$154.00. However, your check(s) and document are being returned for the following:

The SUPPLEMENTAL AFFIDAVIT couldn't be filed because the REINSTATEMENT couldn't be filed. Please return this document when you return the REINSTATEMENT.

Please note that we have RETURNED your \$154.00 check.

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: 499A00002481

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 JAN 20 AM 10:33

RECEIVED

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JAN 20 AM 11:01

THE SIGOUIN FAMILY LIMITED PARTNERSHIP #1

**"SUPPLEMENTAL AFFIDAVIT OF THE AMOUNT OF THE CAPITAL
CONTRIBUTIONS OF THE LIMITED PARTNERSHIP,
AND ANY AMOUNT ANTICIPATED TO BE CONTRIBUTED
BY THE LIMITED PARTNERS"**

The undersigned presents this Affidavit, given under oath, to affirm the following:

1. The amount of the capital contributions to date of the Limited Partnership of the Sigouin Family Limited Partnership #1 is \$25,000.00.
2. The amount anticipated to be contributed by the Limited Partners at this time totals \$-0-.

THE SIGOUIN FAMILY LIMITED PARTNERSHIP # 1

BY: MAURICE F. SIGOUIN, TRUSTEE OF THE MAURICE
F. SIGOUIN REVOCABLE TRUST DATED SEPTEMBER
22, 1997 AS GENERAL PARTNER OF THE SIGOUIN
FAMILY LIMITED PARTNERSHIP # 1, a Florida Limited
Partnership

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 5th day of January, 1999,
by MAURICE F. SIGOUIN, who is personally known to me.

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 5th day of January, 1999
by MAURICE F. SIGOUIN, TRUSTEE OF THE MAURICE F. SIGOUIN REVOCABLE TRUST
DATED SEPTEMBER 22, 1997 AS GENERAL PARTNER OF THE SIGOUIN FAMILY LIMITED
PARTNERSHIP # 1, a Florida Limited Partnership who is personally known to me.

Printed Name: Howard B. Nadel

NOTARY PUBLIC

My Commission Expires: _____

