

Sanat...
Requestor's Name
A97000002215

Address
City/State/Zip Phone #

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-10/17/97--01083--015
****140.00 ****140.00
Office Use Only

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

1. St. Pete Partners, Ltd
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 OCT 14 PM 12:53

☒ Walk in
☐ Mail out

☐ Pick up time _____
☐ Will wait ☐ Photocopy

☒ Certified Copy
☐ 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 checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

S. TAX FILING 52.50
R. AGENT FEE 35.00
COPY 51.50
TOTAL _____
S. NAME _____
CALCULATED DATE _____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32304

file
21

10/14/97

CERTIFICATE OF LIMITED PARTNERSHIP

1. ST. PETE PARTNERS, LTD.
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 1123 Overcash Drive, Dunedin, FL 34698
(Business address of Limited Partnership)
3. Corporation Company of Miami
(Name of Registered Agent for Service of Process)
201 S. Biscayne Boulevard, 1600 Miami Center
Miami, FL 33131
4. _____
(Florida street address for Registered Agent)
Corporation Company of Miami
5. BY: J. B. Zannas J. B. Zannas Asst. Secy.
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 1123 Overcash Drive, Dunedin, FL 34698
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 12/31/2037

8. Name(s) of general partner(s):

K C Capital, Inc.

Street address:

1123 Overcash Drive
Dunedin, FL 34698

P97000088523

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 30th day of September, 19 97

Signature of all general partners:

K C Capital, Inc.

By: _____

General Partner

Robert E. Schmidt, Jr.

General Partner

General Partner

General Partner

General Partner

General Partner

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

The undersigned constituting all of the general partners of _____

ST. PETE PARTNERS, LTD.

a Florida Limited Partnership, certify:

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The amount of capital contributions to date of the limited partners is \$ 99.00

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 99.00

Signed this 30th day of September, 19 97

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

K C Capital, Inc.

By: _____

General Partner

Robert E. Schmidt, Jr.

General Partner

General Partner

General Partner

General Partner

General Partner