

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 MAY 27 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **A97000002256**

1. Name of Limited Partnership
Southeast Legal Copy, Ltd.

DO NOT WRITE IN THIS SPACE

2. Mailing Address
7960 Turnberry Way

3. Principal Office Address
7960 Turnberry Way

4. Date Formed or Registered To Do Business in Florida **10/13/1997**

5. FEI Number **58-2350857**

City & State
Duluth Georgia 30097

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Duluth Georgia 30097

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

Zip Country
USA

Zip Country
USA

7. State or Country of Formation **Florida**

8a. Capital Contributions as Shown on Record
\$100

FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.
3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.
Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

8b. Amount of Capital Contributions in FLORIDA to date
\$100

9. Name and Address of Current Registered Agent

10. If changed, new registered agent/office

Braswell, Curt
3744 Winding Lake Circle
Orlando FL 32835

Name **n/a**
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt #, etc **300002898379--0**
-06/08/99--01065--001
City *****141.FL ***141.25**

10a. Pursuant to the provisions of sections 620.1051 and 620.192 Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192 Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) **Curt Braswell**

DATE **5/18/99**

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Names of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	11a. Registration Document Number
RDC Management, Inc.	7960 Turnberry Way	Duluth GA 30097	F97000005392

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this actual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620 Florida Statutes.

SIGNATURE **John R. Moody**

DATE **5/17/99**

Typed or Printed Name of General Partner Signing Form **JOHN R. MOODY**

Telephone Number **770-232-7474**