

A98000000073

Requestor's Name
5520 SW 78 Street unit c
Address
Miami, Fl. 33143
City/State/Zip Phone #

Office Use Only

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

1. _____ (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

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99 JAN 2 PM 4:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

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A98-113

Name	_____
Availability	_____
Document	_____
Examiner	_____
Updater	_____
Updater	_____
Verifier	_____
Acknowledgement	_____
W. P. Verifier	_____

Examiner's Initials

ENCLOSED IS A CHECK FOR THE
FOLLOWING:

FILING FEE: \$ 56

REGISTERED AGENT: \$ 35

TOTAL DUE: \$ 91

CONTACT NAME: LESLIE RUDD (305) 408-0484

RETURN ADDRESS:

5520 SW 78 ST

UNIT C

MIAMI, FL 33143

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TALLAHASSEE, FLORIDA

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CERTIFICATE OF LIMITED PARTNERSHIP

1. HALCYON TRADING GROUP, LTD.
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 5520 SW 78 ST #C MIAMI, FL 33143
(Business address of Limited Partnership)
3. AUBREY G. RUDD
(Name of Registered Agent for Service of Process)
4. 7210 SW 57 AVE STE 203 MIAMI, FL 33143
(Florida street address for Registered Agent)
5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. P.O. BOX 431619 MIAMI, FL 33243
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 12/31/99

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

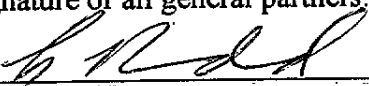
Street address:

<u>LESLIE RUDD</u>	<u>5520 SW 78 ST #C MIAMI, FL 33143</u>
<u>F. TORRES DE NAVARRA</u>	<u>5835 SW 81 ST S. MIAMI, FL 33143</u>

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 17 day of DECEMBER, 19 99

Signature of all general partners:


General Partner

General Partner

General Partner

General Partner

General Partner

General Partner

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

The undersigned constituting all of the general partners of _____
HALCYON TRADING GROUP, LTD.

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 0

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 8000

Signed this 17 day of DECEMBER, 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.*

[Signature]
General Partner

[Signature]
General Partner

General Partner

General Partner

General Partner

General Partner

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