## PP0000008PA

Salect Title Insurance Age (Requestor's Name)  1502 W Fledcher Avenue (Address)  Suite 101  (Address)  Tampa FL 33(e/2)  (City/State/Zip/Phone #)	200013909602
PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)	U3/25/0301001022 **193.75
Certified Copies Certificates of Status  Special Instructions to Filing Officer:	FILED  03 N/3 25 AN © 20  SECRET AND SECRETARE  IALLAND SECRETARIA
Maine  Continent  Cont	eduction contractor

W. P. Verifyer

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

The undersigned general partners of <u>Select Title Insurance Agency</u>	<u>z. Lt</u>	<u>d.</u>	•
		,a	
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to sect Florida Statutes.	ion 620	).112,	•
The total amount of the capital contributions of the limited partners is: \$ 1,000	<u> </u>		
This 14 day of March , 2003 .			
FURTHER AFFIANT SAYETH NOT.			
Under penalties of perjury I declare that I have read the foregoing and that the facts ar best of my knowledge and belief.	etrue,	te_the ယ	:
General Partner(s)	RETARY AHASSEI	MAR 25	FILE
Partners Title Services Corporation  James G. Farr, President	OF STATE E, FLORIDA	AN 9: 29	ED

Fees:

\$7 per \$1000, based on additional contributions

Minimum \$ 52.50 Maximum \$1750.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314