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_	Requestor's Name	-
5051	Lastello Orive +	# 23q
	Address	
Naple	te/Zip Phone #	6000024014668 -01/15/9801051002
City/Sta	te/Zip Phone #	
CORRORIETTO		Office Ose Only
CORPORATIO	N NAME(S) & DOCUMENT NU	JMBER(S), (if known):
1		•
(Co	orporation Name)	Document #)
2		•
(Co	rporation Name) (Document #)
3	rporation Name)	Document #)
	poration Name)	Document #)
4(Co	rporation Name)	Document #)
	, (1	Socialient #)
☐ Walk in	Pick up time	Certified Copy
processor and the second secon	☐ Will wait ☐ Photocopy	
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NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Dire	CCTOT CONTROL OF CONTR
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	-
Valme 1 Other	Merger	
Availability (1)		· · · · · · · · · · · · · · · · · · ·
OCUMENTO THER FILINGS	REGISTRATION/	
xaminer Annual Report DCC	QUALIFICATION	
dater Fictitious NameCC	Foreign	-
Name Reservation	Limited Partnership	
enlyer DOC	Reinstatement	·
clino ladgement DCC	Trademark	
. P. Verifyer DCC	Other	\$5,000.00
CR2E031(1/95)		Evaminer's Initials

CERTIFICATE OF LIMITED PARTNERSHIP

1. (Name of Limited Partnership; must contain a suffix such as "Limited", "Lid.", or "Limited Partnership."	-
(Name of Limited Partnership; must contain a suffix such as "Limited", "Lid.", or "Limited Partnership."	ership")
2	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
3. Richard Sahli (Name of Registered Agent for Service of Process)	
4. 368 HARBOUR OR, NAPLES FL, 3. (Florida street address for Registered Agent)	
5.	, <u>** </u>
5. (Registered Agent must sign here to accept designation as Registered Agent for Service of Proce	ess)
6. 5651 CASTELLS DR #239 NAPLES, FL 34 (Mailing Address of the Limited Partnership)	98 JAN -
7. The latest date upon which the Limited Partnership is to be dissolved is: 8. Name(s) of general partner(s): Street address:	G 49
BICHARD Sahli 368 HARBOUR DR. M	150 es. F1. 34
	<u> </u>
	<u></u> .
Under penalties of perjury I (we) declare that I (we) have read the foregoing and know contents thereof and that the facts stated herein are true and correct.	the
Signed this 12 day of January, 19 78	* * *
Signature of all general partners:	
15/	-
General Partner General Par	tner
General Partner	
General Par	mer
General Partner General Part	ner

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FLORIDA LIMITED PARTNERSHIP

The undersigned constituting all of the general p		
a Florida Limited Partnership, certify:		,
The amount of capital contributions to date of the	he limited partners is \$	<u>.</u>
	98 JAN	<u> </u>
The total amount contributed and anticipated to	be contributed by the limited partners at this	time
totals \$ 5,000		Ö .
Signed this 12 day of JANUAN	7,19 98 8	
FURTHER AFFIANT SAYETH NOT.		
Under the penalties of perjury I (we) declare the contents thereof and that the facts stated herein	at I (we) have read the foregoing and know t are true and correct.	hę
75/		e e e e e e e e e e e e e e e e e e e
General Partner	General Partner	•
General Partner	General Partner	
General Partner	General Partner	