P46000000 344

· Cromwell, Pfaffenberger, Barner, Griffin & Colton, P.A.

ATTORNEYS AT LAW

631 U.S. HIGHWAY ONE - SUITE 410

P.O. BOX 14036

North Palm Beach, Florida 33408

TELEPHONE (561) 863-8300 TELEFAX (561) 863-5133 OF COUNSEL

ROBERT F CROMWELL

300002748553----8.

_-01/20/99--01105--003 _

January 14, 1999

Department of State PL02 The Capital Tallahassee, FL 32399-0250

Dear Sirs:

W.J. PFAFFENBERGER

LAWRENCE C. GRIFFIN

SCOTT M. COLTON

FREEMAN W. BARNER, JR., P.A.

Enclosed please find the Certificate of Limited Partnership and Affidavit for the Parkes Family Limited Partnership. The requested information pursuant to the Florida Statute 620.108 is included, and the total amount of capital contributed at this point and anticipated in the future by the limited partners, is zero.

Also enclosed is a check in the amount of \$140.00 for filing fees, registered agent designation, and a certified copy. Should you need any further information, please do not hesitate to call.

Thank you for your help and cooperation.

Very truly yours,

Scott M. Colton

9 FEB 12 AMI

Name 1 20199
Availability MC/mf
Enclosures
Continent
Designs cc: Mrs. Willberta J. Parkes
Line and Continent
Verifyer
W. P. Verifyer

DCC

Verifyer

DCC

Verifyer

DCC

Verifyer

DCC

Verifyer

DCC

Fre 000000 247

<u>ير</u> ر

811600000PLW

CROMWELL, PFAFFENBERGER, BARNER, GRIFFIN & COLTON, P.A.

ATTORNEYS AT LAW
631 U.S. HIGHWAY ONE - SUITE 410
P.O. BOX 14036

North Palm Beach, Florida 33408

TELEPHONE (561) 863-8300 TELEFAX (561) 863-5133 OF COUNSEL

ROBERT F. CROMWELL

February 9, 1999

Florida Department of State PL02 The Capital Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Dear Sirs:

W.J. PFAFFENBERGER

LAWRENCE C. GRIFFIN

SCOTT M. COLTON

FREEMAN W. BARNER, JR., P.A.

Enclosed please find the Certificate of Limited Partnership, the Affidavit for the Parkes Family Limited Partnership, the Registered Agent form, along with your letter of January 27, 1999. The requested information pursuant to the Florida Statute 620.108 is included, and the total amount of capital contributed at this point and anticipated in the future by the limited partners, is zero.

Please be so kind as to send us a certified copy. Should you need any further information, please do not hesitate to call.

Thank you for your help and cooperation.

Very truly yours

Scott M. Colton

SMC/mf Enclosures

cc: Mrs. Wilberta J. Parkes



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 27, 1999

SCOTT M. COLTON CROMWELL PFAFFENBERGER BANNER ET AL P.O. BOX 14036 NORTH PALM BEACH, FL 33408

SUBJECT: PARKES FAMILY LIMITED PARTNERSHIP

Ref. Number: W99000002118

We have received your document for PARKES FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the name and address of the registered agent. The person signing as registered agent and the person listed as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 899A00003754

CERTIFICATE OF LIMITED PARTNERSHIP

The undersigned, in order to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Sections 620.101, et seq. of the Florida Statutes, do hereby certify:

- 1. The name of the limited partnership is THE PARKES FAMILY LIMITED PARTNERSHIP.
- 2. The address of the office of the partnership is 1222 S.W. 120TH Way, <u>Davie</u>, Florida 33325.
 - 3. The name of the agent for service of process is WILBERTA J. PARKES.
- 4. The name of the general partner is **Wilberta J. Parkes** whose known address is 1222 S.W. 120th Way, Davie, Florida 33325.
- 5. The mailing address for the limited partnership is 1222 S.W. 120th Way, Davi Florida 33325.
- 6. The latest date upon which the limited partnership is to dissolve is thirty-five (35) years from the filing of this Certificate;
 - 7. This certificate is effective upon filing.

The undersigned affirms under penalties of perjury that the facts stated herein are true.

WILBERTA PARKES

AFFIDAVIT

The undersigned, WILBERTA J. PARKES, TRUSTEE U/A DATED December 10, 1998 F/B/O WILBERTA J. PARKES, the general partner of THE PARKES FAMILY LIMITED PARTNERSHIP, being duly sworn, does hereby depose and say:

- 1. I am over the age of eighteen (18) years and believe in the obligation of an oath.
- 2. The limited partners have made no contributions to the partnership. No future contributions by the limited partners is anticipated.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 10th day of <u>December</u> 1998.

Welkerta Stacke WILBERTA J. PARKES, TRUSTEE

STATE OF FLORIDA

COUNTY OF PALM BEACH

Hilda M. Porro
Commission # CC 770765
Expires OCT. 17, 2002
BONDED THRU
ATLANTIC BONDING CO., INC.

Notary Public

Notary Public

Print Name HILDA M. PORTEO

My commission expires: $10-17-\overline{02}$

My Comm. Number: CC770765

C:\MyFiles\parkes\parkes-ltdpartagr.wpd

REGISTERED AGENT

I, WILBERTA J. PARKES do hereby acknowledge that I am the Registered Agent of the Parkes Family Limited Partnership. I reside at 1222 S.W. 120th Street, Davie, Florida 33325.

Signature

WILBERTA J. PARKES

Print name

Wilberta J. Parkes 1222 S.W. 120th Street Davie, Florida 33325

9 FEB 12 AM III OC