

A99000001515

Requestor's Name

Address

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 #)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 SEP 20 AM 11:20

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

400002990664--7
-09/20/99--01037--038
****437.50 *****87.50

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

LP-87.50

BK 9/20/99

CERTIFICATE OF LIMITED PARTNERSHIP

1. FULL CIRCLE LTD. INVESTMENTS, LTD.

(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")

2 595 N. COURTENAY PARKWAY, MERRITT ISLAND, FL 32953

(Business address of Limited Partnership)

3. STEPHENAS TRINITY

(Name of Registered Agent for Service of Process)

4. 595 N. COURTENAY PARKWAY, MERRITT ISLAND, FL 32953

(Florida Street address for Registered Agent)

5. *S. Trinity*
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)

6. 595 N. COURTENAY PARKWAY, MERRITT ISLAND, FL 32953

(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: AUG 31ST, 2024

8. Name(s) of general partner(s): TRI-FUNDING GROUP, INC. 595 N COURTENAY PARKWAY, MERRITT ISLAND, FL 32953

350763

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 13 day of Sept., 19 99.

Signature of all general partners:

Tri-Funding Group Inc.
General Partner

by *S. Trinity Pres.*
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 Full Circle ~~LLC~~
INVESTMENTS, LTD.

a Florida Limited Partnership, certify:

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The amount of capital contributions to date of the limited partners is \$ 100.⁰⁰

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 100.⁰⁰

Signed this 19th day of Sept., 19 99

FURTHER AFFLIANT 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.*

Tri-Funding Group Inc.

By S. Trinity, President
General Partner

General Partner

General Partner

General Partner

General Partner

General Partner