

A 99000001854



JONATHAN S. DEAN P.A.\*  
MICHAEL E. DEAN  
SUSAN E. DEAN P.A.  
DAVID E. MIDGETT P.A.

A LIMITED LIABILITY PARTNERSHIP  
CONSISTING OF PROFESSIONAL ASSOCIATIONS  
ATTORNEYS AT LAW

MAILING ADDRESS:  
230 N.E. 25TH AVENUE  
OCALA, FLORIDA 34470-2938

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October 14, 1999

Secretary of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314-6327

EFFECTIVE DATE  
10-13-99

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-10/15/99--01030--006  
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-11/12/99--01017--001  
\*\*\*\*171.50 \*\*\*\*171.50

RE: The Fakhoury/Saldarriaga Limited Partnership

Dear Sirs:

Enclosed please find our firm's check in the amount of \$87.50 representing the filing fee for the enclosed Limited Partnership Agreement.

If you have any questions regarding the aforementioned, please do not hesitate to contact me.

Very truly yours,

DEAN AND DEAN, L.L.P.

Lisa M. Wilson  
Legal Assistant

/lmw  
Enclosures

\\TR\\SECSTATE\\ART

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99 OCT 15 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
SC



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

October 20, 1999

LISA M. WILSON  
DEAN & DEAN  
230 NE 25TH AVENUE  
OCALA, FL 34470-2938

SUBJECT: THE FAKHOURY / SALDARRIAGA LIMITED PARTNERSHIP  
Ref. Number: W99000024181

We have received your document for THE FAKHOURY / SALDARRIAGA LIMITED PARTNERSHIP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 620.108, Florida Statutes, requires that limited partnership certificates include the mailing address in addition to the principal place of business address. Please correct your document accordingly. If the mailing address and principal place of business are one and the same, please be sure this is clearly reflected in your document.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Section 620.108, Florida Statutes, requires the affidavit include the amount of capital contributions of the limited partners and the amount anticipated to be contributed.

We are enclosing the proper form(s) with instructions for your convenience.

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) 487-6043.

Shawn Logan  
Document Specialist

Letter Number: 999A00050554

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FILED  
TALLAHASSEE, FLORIDA

# **CERTIFICATE OF LIMITED PARTNERSHIP**

**OF**

## **THE FAKHOURY / SALDARRIAGA LIMITED PARTNERSHIP**

The parties hereto do hereby certify that an Agreement was made effective the 13<sup>th</sup> day of October, 1999, at Marion County, Florida, by the following, herein called "General Partners":

**JAMAL A. FAKHOURY, as Trustee  
of the JAMAL A. FAKHOURY  
FAMILY TRUST dated April 25, 1994**

**ALVARO SALDARRIAGA**

and by the following, hereinafter referred to as "Limited Partners":

**JAMAL A. FAKHOURY, as Trustee  
of the JAMAL A. FAKHOURY  
FAMILY TRUST dated April 25, 1994**

**TAMARA G. FAKHOURY, as Trustee  
of the TAMARA G. FAKHOURY  
FAMILY TRUST dated April 25, 1994**

**ALVARO SALDARRIAGA**

**CLAUDIA SALDARRIAGA**

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MARION COUNTY, FLORIDA

### **WITNESSETH:**

1. *Name.* The name of this Limited Partnership is **THE FAKHOURY/  
SALDARRIAGA LIMITED PARTNERSHIP.**

2. *Business.* The general character of the Partnership business shall be to, purchase and sell real estate, and conduct a general business as thereto related.

3. *Principal Place of Business and Mailing Address.* The location of the principal place of business of the Partnership and mailing address is 2418 Southeast 15<sup>th</sup> Street, Ocala, Florida.

4. *Registered Agent and Office.* The registered agent for this Limited Partnership is Jamal A. Fakhoury. The street address of the registered agent and the registered office is 2418 Southeast 15<sup>th</sup> Street, Ocala, Florida.

5. *The Partners.* The General Partner and Limited Partners of this Limited Partnership are as follows:

General Partner	Address
JAMAL A. FAKHOURY, as Trustee of the JAMAL A. FAKHOURY FAMILY TRUST dated April 25, 1994	2418 Southeast 15 <sup>th</sup> Street Ocala, Florida 34471
ALVARO SALDARRIAGA	10180 Northwest 76 <sup>th</sup> Terrace Ocala, Florida 34482
Limited Partners	Place of Business
JAMAL A. FAKHOURY, as Trustee of the JAMAL A. FAKHOURY FAMILY TRUST dated April 25, 1994	2418 Southeast 15 <sup>th</sup> Street Ocala, Florida 34471
TAMARA G. FAKHOURY, as Trustee of the TAMARA G. FAKHOURY FAMILY TRUST dated April 25, 1994	2418 Southeast 15 <sup>th</sup> Street Ocala, Florida 34471
ALVARO SALDARRIAGA	10180 Northwest 76 <sup>th</sup> Terrace Ocala, Florida 34482
CLAUDIA SALDARRIAGA -	10180 Northwest 76 <sup>th</sup> Terrace Ocala, Florida 34482

6. *Term.* The Partnership shall begin on the 13<sup>th</sup> day of October, 1999, and shall continue for 25 years thereafter unless sooner dissolved by law or by agreement of the parties hereto or unless extended by a majority agreement of the Partners.

7. *Additional Contributions.* The following additional contributions of the Partners have been agreed upon:

Each Partner hereby agrees to contribute \$400.00, that being a total of \$1,600.00 to form the partnership. Additional contributions will be assessed as needed by the General Partners.

8. *Return of Contributions.* No Limited Partner shall be entitled to withdraw or demand the return of any part of such Partner's capital contribution except upon dissolution of the Partnership.

9. *Profits.* All annual net profits of the Partnership shall be divided among the General and Limited Partners in the same proportions as the Partners' then capital interest accounts, unless retained for the Partnership investment and business activities.

10. *Assignments.* A Limited Partner shall have the right to sell such Partner's interest in the Partnership but only after such Limited Partner gives to the Partnership at 120-day opportunity to purchase such interest, as explained in detail by the Partnership Agreement.

11. *Additional Limited Partners.* The General Partners may admit additional limited partners.

12. *Priority Among Limited Partners.* There is no priority of one Limited Partner over another as to the contributions or compensation by way of income.

13. *Continuance of Business.* Upon the death, retirement or incapacity of the surviving General Partners, the Partnership shall dissolve unless continued by the remaining Partners and selecting when necessary a new General Partner. If the last surviving or serving General Partner has died, retired and/or becomes insane, then the Limited Partners holding interest in capital in excess of 50% of the capital owned by all Limited Partners may elect to continue the Partnership by selecting a new General Partner.

14. *Property Other Than Cash.* A Limited Partner may not demand property other than cash in return for such Partner's contributions.

15. *Amount of Cash and Agreed Value and Description of Other Property Contributed.* The Partners in the Limited Partnership have contributed their interest in the property as set forth in Schedule "A" attached hereto.

Partners	Percentage Interest	Contributions
JAMAL A. FAKHOURY, as Trustee of the JAMAL A. FAKHOURY FAMILY TRUST dated April 25, 1994	25%	\$400.00
TAMARA G. FAKHOURY, as Trustee of the TAMARA G. FAKHOURY FAMILY TRUST dated April 25, 1994	25%	\$400.00
ALVARO SALDARRIAGA	25%	\$400.00
CLAUDIA SALDARRIAGA	25%	\$400.00

**GENERAL PARTNER:**

  
JAMAL A. FAKHOURY, Trustee

  
ALVARO SALDARRIAGA

**LIMITED PARTNERS:**

  
JAMAL A. FAKHOURY, Trustee

  
TAMARA G. FAKHOURY, Trustee

  
ALVARO SALDARRIAGA

  
CLAUDIA SALDARRIAGA

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TALLAHASSEE, FLORIDA

**Schedule "A"**

Attached to **THE FAKHOURY / SالدARRIAGA LIMITED PARTNERSHIP**, dated the 13<sup>th</sup> day of October, 1999.

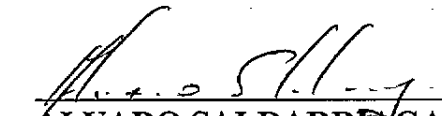
1. The following real estate subject to the encumbrances owed thereon to-wit:
  
  
  
  
  
  
  
  
  
  
2. The following accounts in the following institutions, together with all future additions, interest or accumulations therein:

- 
3. The following securities in the following companies: None.
  4. The following vehicles: None.
  5. All rights, title and interests in and to the following: None.

DATED the 13<sup>th</sup> day of October, 1999.

GENERAL PARTNERS:

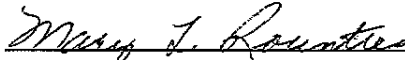
  
JAMAL A. FAKHOURY, Trustee

  
ALVARO SالدARRIAGA

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TALLAHASSEE, FLORIDA

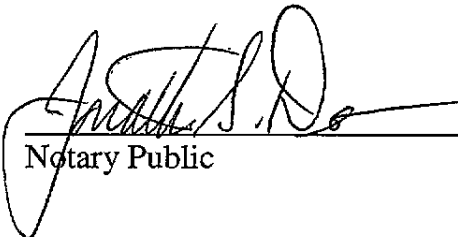
STATE OF FLORIDA  
COUNTY OF MARION

The foregoing instrument was acknowledged before me this 13<sup>th</sup> day of October, 1999, by **JAMAL A. FAKHOURY** who is personally known to me.

  
\_\_\_\_\_  
Notary Public  
**MARY L. ROUNTREE**  
Notary Public, State of Florida  
My comm. expires April 20, 2001  
Comm. No. CC635491

STATE OF FLORIDA  
COUNTY OF MARION

The foregoing instrument was acknowledged before me this 13<sup>th</sup> day of October, 1999, by **ALVARO SILDARRIAGA** who is personally known to me or produced a Florida driver's license as identification.

  
\_\_\_\_\_  
Notary Public

VCORPFAKHOURY.LP.2



Jonathan S. Dean  
MY COMMISSION # CC626376 EXPIRES  
March 26, 2001  
BONDED THRU TROY FAIR INSURANCE, INC.

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TALLAHASSEE, FLORIDA

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

The undersigned constituting all of the general partners of **THE FAKHOURY / SALDARRIAGA LIMITED PARTNERSHIP**, a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$1,600.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$31,600.00.

Signed this 26 day of October, 1999.

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.

  
**JAMAL A. FAKHOURY**  
General Partner

  
**ALVARO SALDARRIAGA**  
General Partner

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**DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT FOR A  
FLORIDA LIMITED PARTNERSHIP**

Pursuant to the provisions of F.S. Chapter 620, the undersigned limited partnership, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent in the State of Florida.

1. The name of the limited partnership is **FAKHOURY/SALDARRIAGA LIMITED PARTNERSHIP**.
2. The name of the registered agent is **JAMAL A. FAKHOURY**.
3. The address of the registered agent/registered office is 2418 Southeast 15th Street, Ocala Florida 34471.

**ACCEPTANCE**

Having been named as registered agent and designated to accept service of process for the above limited partnership, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

**DATED** this 26 day of October, 1999.

  
**JAMAL A. FAKHOURY**  
Registered Agent

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