

A99000902022

JOHN THIERRY  
1702 BEN COVE CT  
ORLANDO FL 32818

City/State/Zip

Phone #

200003059082--0...  
-12/02/99--01067--007  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

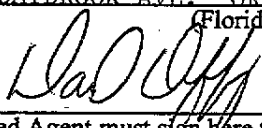
- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

FILED  
DEC -2 AM 9:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SL

Examiner's Initials

## CERTIFICATE OF LIMITED PARTNERSHIP

1. STAGGER LEE ENTERPRISES I, Ltd  
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 1702 BEN COVE CT. ORLANDO, FL 32818  
(Business address of Limited Partnership)
3. DAVID DUFFY  
(Name of Registered Agent for Service of Process)
4. 5405 BAYBROOK AVE. ORLANDO, FLORIDA 32819  
(Florida street address for Registered Agent)
5.   
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 1702 BEN COVE CT, ORLANDO, FL 32818  
(Mailing Address of the Limited Partnership)

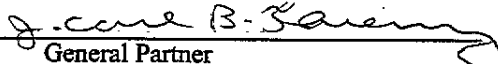
7. The latest date upon which the Limited Partnership is to be dissolved is: March 8, 2020
8. Name(s) of general partner(s): \_\_\_\_\_ Street address: \_\_\_\_\_

JOHN CARL BRIAN THIERRY 1702 BEN COVE CT. ORLANDO, FL 32818

*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 29<sup>th</sup> day of NOVEMBER, 19 1999

Signature of all general partners:

  
General Partner

\_\_\_\_\_  
General Partner

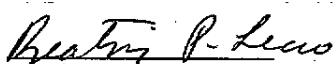
\_\_\_\_\_  
General Partner

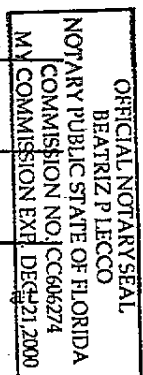
\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

Sworn to before me this 29th day of November, A.D.1999 by John C Thierry,  
West Palm Beach, FL

Drivers Lic.#T600-463-64-044-0  Beatriz P. Lecco-Notary Public



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

The undersigned constituting all of the general partners of \_\_\_\_\_

STAGGER LEE ENTERPRISES I, LTD

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 0

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ \$2000

Signed this 29<sup>th</sup> day of NOVEMBER, 19 99

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.

[Signature]  
General Partner

General Partner

General Partner

General Partner

General Partner

General Partner

Sworn to before me, John C Thierry, this 29th day of November, A.D. 1999, at West Palm Beach, Florida

Beatriz P. Lecco  
Beatriz P Lecco-Notary Public

ID presented: Drivers License #T600-463-64-044-0

