

A99000002264

ATTORNEYS' TITLE

Requestor's Name

660 E. Jefferson St.

Address

Tallahassee, FL 32301

City/St/Zip

850-222-2785

Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- BGM FAMILY LIMITED PARTNERSHIP

2- _____

3- _____

4- _____

99 DEC 28 PM 1:57

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

A99000060813

RECEIVED
99 DEC 30 AM 11:30
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit |
| <input type="checkbox"/> | Non-Profit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|-------------------------------------|---------------------------------------|
| <input checked="" 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 |

| 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 |

700003085087--2
-12/30/99--01080--014
***1697.50 ***1697.50

Examiner's Initials

12/28/99

LP 1645.00
CERT- 52.50



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

December 28, 1999

ATTORNEYS' TITLE

TALLAHASSEE, FL

SUBJECT: BGM FAMILY LIMITED PARTNERSHIP
Ref. Number: W99000029496

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DIVISION OF CORPORATIONS
99 DEC 28 PM 1:57

We have received your document for BGM FAMILY LIMITED PARTNERSHIP and check(s) totaling \$1653.75. However, your check(s) and document are being returned for the following:

Please note that we have RETURNED your \$1,653.75 check.

With a total of \$230,000.00 in limited partner contributions, the filing fee for this partnership would be \$1,610.00. The required F.A. fee is \$35.00. So the TOTAL AMOUNT REQUIRED to file the partnership would be \$1,645.00.

Please note that the \$1,653.75 check would leave a balance of \$8.75, which would pay for a CERTIFICATE OF STATUS. But your cover sheet indicates that you want a CERTIFIED COPY. The CERTIFIED COPY is \$52.50.

So if you actually want a certified copy, please return with a TOTAL OF ~~\$1,837.50~~ ^{\$1,697.50}.

ALSO, the Certificate identifies the general partners as TRUSTEES. Are they trustees? If so, you must identify the NAME OF THE TRUST for which they are the trustees.

The AFFIDAVIT seems to identify the general partners as INDIVIDUALS. If they are individuals, then please remove the "trustee" designations from the certificate document.

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) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 499A00060412

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**CERTIFICATE OF LIMITED PARTNERSHIP
OF THE
BGM FAMILY LIMITED PARTNERSHIP**

RECEIVED
99 DEC 28 PM 1:57
CLERK OF COURT
HAINES CITY, FL 33844

The undersigned, for the purpose of forming a limited partnership under the provisions of the Florida Revised Uniform Limited Partnership Act (1986), as set forth in Section 620.101, et seq. of the Florida Statutes, do hereby certify to the following:

1. The name of the limited partnership is **"BGM FAMILY LIMITED PARTNERSHIP"**.

2. The address of the office of the limited partnership required to be maintained by Section 620.105(1), Florida Statutes, is as follows:

13 Edwards Shores
Haines City, FL 33844

3. The name and street address of the registered agent, for service of process on the limited partnership, required to be maintained by Section 620.105(2), Florida Statutes, are as follows:

William L. Myers
13 Edwards Shores
Haines City, FL 33844

4. The name and business address of the general partners are:

William Luke Myers, as Trustee of the William Luke Myers Revocable
Trust No. 1, dated November 29, 1989, as amended
13 Edwards Shores
Haines City, FL 33844

Gladys Marie Myers, as Trustee of the Gladys Marie Myers Revocable
Trust, dated November 29, 1989, as amended
13 Edwards Shores
Haines City, FL 33844

5. The mailing address for the limited partnership is as follows:

13 Edwards Shores
Haines City, FL 33844

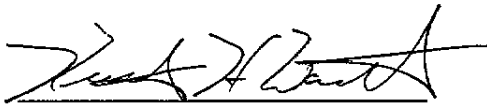
6. The latest date upon which the limited partnership is to dissolve is December 31, 2028.


7. An affidavit declaring the amount of the capital contributions of the limited partners and the amount anticipated to be contributed by the limited partners, as required by Section 620.108, Florida Statutes, is attached to this certificate.

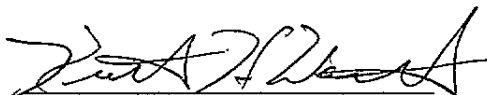
IN WITNESS WHEREOF, the undersigned has executed this certificate as of the 28th day of December 1999.


Signed, sealed and delivered
in the presence of:

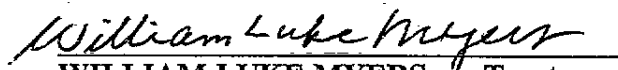
GENERAL PARTNERS:

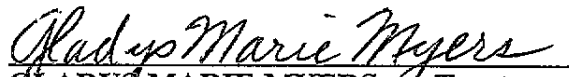

Printed Name: Keith H. Wadsworth


Printed Name: Andrea L Fish


Printed Name: Keith H. Wadsworth


Printed Name: Andrea L Fish


WILLIAM LUKE MYERS, as Trustee
of the William Luke Myers Revocable
Trust No. 1, dated November 29, 1989


GLADYS MARIE MYERS, as Trustee
of the Gladys Marie Myers Revocable
Trust, dated November 29, 1989

**ACCEPTANCE OF
REGISTERED AGENT FOR THE
BGM FAMILY LIMITED PARTNERSHIP**

SECRET//NOFORN
DIVISION OF CORPORATIONS
99 DEC 28 PM 1:57

Having been named as registered agent to accept service of process upon the above named partnership, at the address designated in the certificate of 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 state that I am a resident of the State of Florida and I am familiar with, and accept, the obligations of my position as registered agent.

Dated: December 28, 1999

William L. Myers
WILLIAM L. MYERS

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
TO THE BGM FAMILY LIMITED PARTNERSHIP**

RECEIVED
99 DEC 28 PM 1:57
AFFIDAVIT OF CAPITAL CONTRIBUTIONS


The undersigned affiants, **WILLIAM LUKE MYERS**, as Trustee of the William Luke Myers Revocable Trust No. 1, dated November 29, 1989, as amended, and **GLADYS MARIE MYERS**, as Trustee of the Gladys Marie Myers Revocable Trust, dated November 29, 1989, as amended, as general partners of the BGM FAMILY LIMITED PARTNERSHIP, whose address is 13 Edwards Shores, Haines City, FL 33844, after each being first duly sworn, says upon oath:

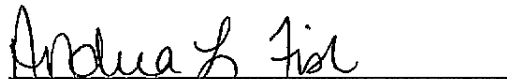
1. Affiants are the general partners of the **BGM FAMILY LIMITED PARTNERSHIP**, a Florida limited partnership.


2. The total amount of the capital contributions of the limited partners and the amount of capital anticipated to be contributed by all of the limited partners of the partnership is \$230,000.00. The capital contributed to the partnership may be either cash or property, real or personal, tangible or intangible.


3. This affidavit is given for the purpose of complying with the provisions of Section 620.108 of the Florida Statutes.

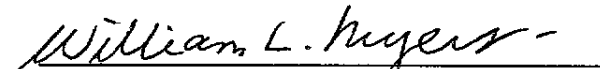
FURTHER, AFFIANTS DO NOT SAY.



Printed Name: Keith H. Wadsworth


Printed Name: Andrea L. Fish


Printed Name: Keith H. Wadsworth


Printed Name: Andrea L. Fish


WILLIAM L. MYERS, as Trustee
of the William Luke Myers Revocable
Trust No. 1, dated November 29, 1989


GLADYS M. MYERS, as Trustee
of the Gladys Marie Myers Revocable
Trust, dated November 29, 1989

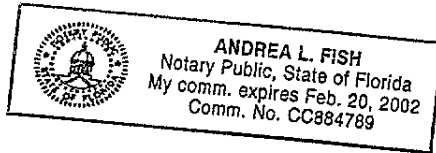
STATE OF FLORIDA

COUNTY OF FOLK

RECEIVED
DIVISION OF CORPORATIONS
99 DEC 22 PM 1:57

I HEREBY CERTIFY that on December 28, 1999, before me, the undersigned Notary Public, authorized in the State and County named above to administer oaths, personally appeared **WILLIAM L. MYERS**, as Trustee of the **William Luke Myers Revocable Trust No. 1**, dated November 29, 1989 and **GLADYS M. MYERS**, as Trustee of the **Gladys Marie Myers Revocable Trust**, dated November 29, 1989, as general partners of the **BGM FAMILY LIMITED PARTNERSHIP**, who, after being by me first duly sworn, says upon oath the above statements. Sworn to and subscribed before me on this day by **WILLIAM L. MYERS**, as Trustee of the **William Luke Myers Revocable Trust No. 1**, dated November 29, 1989 and **GLADYS M. MYERS**, as Trustee of the **Gladys Marie Myers Revocable Trust**, dated November 29, 1989, as general partner of the **BGM FAMILY LIMITED PARTNERSHIP**, on behalf of the partnership. They are personally known to me or have produced a drivers license as identification.

(SEAL)



Andrea L Fish
Printed Name: Andrea L. Fish
Notary Public
My Commission Expires: