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Sunstate Research
Requester's Name

Address

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Phone #

Office Use Only

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

1. Baster Family Limited
(Corporation Name) (Document #)

2. Partnership
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☐ Pick up time
☐ Mail out ☐ Will wait ☐ Photocopy

☒ Certified Copy
☒ Certificate of Status
700003516997--1
-12/29/00--01048--012
****148.75 ****148.75

NEW FILINGS

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

AMENDMENTS

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

REGISTRATION/QUALIFICATION

☒ Foreign
☒ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

Name Available	
Document Examiner	DCC
Updater	DCC
Verifier	DCC
Adm. Agent	DCC
W. P. Verifier	DCC

Examiner's Initials

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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\$0

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

I. NAME - HOME STATE

The name of the limited partnership as it is in the state of formation is Basten Family Limited Partnership.

II. NAME - FLORIDA

The name under which the limited partnership proposes to register or transact business in Florida is Basten Family Limited Partnership.

III. FORMATION

The state of formation is Nevada, and the date of formation is August 16, 2000.

IV. REGISTERED AGENT

The registered agent for service of process is:

Louis Nostro, Esq.
1500 Miami Center
201 South Biscayne Boulevard
Miami, Florida 33131

If the above-named agent's authority has been revoked or the agent cannot be found or served with the exercise of reasonable diligence, the Florida Secretary of State is appointed the registered agent of the limited partnership.

V. REGISTERED OFFICE - STATE OF FORMATION

The address of the Registered Office in the state of formation is:

c/o Nevada Corporate Services Group, LLC
723 South Casino Center Boulevard, 2d Floor
Las Vegas, Nevada 89101-6716

VI. GENERAL PARTNER

The name and business address of the sole general partner is:

William J. Basten
1484 Shelter Rock Road
Orlando Florida, 32825

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TALLAHASSEE, FLORIDA

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VII. RECORDS OFFICE - FLORIDA

The address of the office at which is kept a list of names and addresses of the limited partners and their capital contributions is:

c/o Louis Nostro, Esq.
1500 Miami Center
201 South Biscayne Boulevard
Miami, Florida 33131

The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partners until the limited partnership's registration in Florida is cancelled or withdrawn.

VIII. MAILING ADDRESS


The mailing address of the limited partnership is:

c/o Louis Nostro, Esq.
1500 Miami Center
201 South Biscayne Boulevard
Miami, Florida 33131

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TALLAHASSEE, FLORIDA

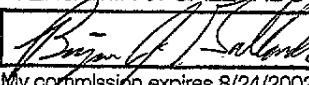
Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 27 day of December, 2000.


William J. Basten, General Partner of the
Basten Family Limited Partnership

NOTARY PUBLIC - STATE OF FLORIDA

BENJAMIN J. GALLARDO



My commission expires 8/24/2002

#CC 770016

REGISTERED AGENT ACCEPTANCE

Having been named to accept service of process for the limited partnership at the above-stated address, the undersigned individual hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete discharge of his duties.

Date: December 28, 2000

Louis Nostro
Louis Nostro, Esq.

STATE OF FLORIDA)
) SS:
COUNTY OF ORANGE)

The foregoing instrument was acknowledged to me this ____ day of December, 2000 by
WILLIAM J. BASTEN,

☐ who is personally known to me

☒ whose identity I proved on the basis of FL. DRIVERS LICENSE

My Commission Expires:

Notary Public
State of Florida at Large

Printed Name of Notary Public

NOTARY PUBLIC - STATE OF FLORIDA
BENJAMIN J. GALLARDO

Benjamin J. Gallardo

My commission expires 8/24/2002
#CC 770016

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TALLAHASSEE, FLORIDA

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR A FOREIGN LIMITED PARTNERSHIP**

The undersigned, **WILLIAM J. BASTEN**, a general partner of Basten Family Limited Partnership, a Nevada limited partnership, hereinafter referred to as the "Partnership", certifies as follows:

1. The amount of capital contributions of the limited partners is \$1,000.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$0.00.

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 27 day of December, 2000.


William J. Basten, General Partner of the
Basten Family Limited Partnership

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
) SS:
COUNTY OF ORANGE)

The foregoing instrument was acknowledged to me this ____ day of December, 2000 by **WILLIAM J. BASTEN**,

☐ who is personally known to me

☒ whose identity I proved on the basis of FL. Drivers License

My Commission Expires:

NOTARY PUBLIC - STATE OF FLORIDA
BENJAMIN J. GALLABDO


My commission expires 8/24/2002
#CC 770016

Notary Public
State of Florida at Large

Printed Name of Notary Public