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| (Re | equestor's Name) | |
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| (Ac | ddress) | |
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| (Ci | ty/State/Zip/Phone | ∋ #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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LAW OFFICES STEVEN LULICH, P.A.

STEVEN LULICH Attorney & Consultant

steve • lulich.com www.lulich.com

P.O. BOX 781390 SEBASTIAN, FL 32978-1390 (772) 589-5500 FAX:4772) 589-8800

March 23, 2004

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

RE: Crowther Family Limited Partnership

Gentlemen:

Enclosed please find the following described documents for processing in regards to the above captioned:

- 1) Original executed Application by Foreign Limited Partnership for authorization to transact business in Florida.
- 2) Original executed Affidavit of Capital contributions for a foreign limited partnership.
- 3) Check number 26415 made payable to the Secretary of State in the sum of \$96.25 representing \$7.00 pr thousand of capital contribution; designation of registered agent and certified copy.

Please process accordingly.

Sincerely,

STEVEN LULICH, ESQUIRE

Steven duliding

SL:dj enclosures

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

| 1. Bradford Crowther Family Limited Partnershi (Name of limited partnership as it is in the home state | e) |
|---|-------------------------------------|
| 2. (If rame is unavailable, name under which the limited partnership proposes to registe must contain the word "LIMITED" or "LTD.") | er or transact business in Florida; |
| 3. Pennsylvania 4. June 1, 199 (Date | of Formation) |
| 5. Bradford I. Crowther, Sr. (Name of Registered Agent for Service of Process) | |
| 6. 8655 92nd Ave. (Street Address of Registered Office) | |
| Vero Beach , Florida 32 | (Zip Code) |
| 7. Acceptance by the Registered Agent for Service of Process: | |
| Branford (Agent must sign on this line) | O4 1567 ALL AH |
| 8. 8655 92nd Ave. | |
| Vero Beach, Florida 32967 (Address of registered office required in state of formation or, if not required, | address of principal office.) |
| | ET ADDRESS |
| Bradford L. Crowther, Sr. | |
| Bethany G. Crowther | |
| | |
| 8655 92nd Ave., Vero Beach, FL 32967 | |

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

(Office where Names, Addresses and Contributions of Limited Partners are kept.)

| 12 | 8655 92nd <i>1</i> | venu | ıe | | | | | | |
|----------------------|--|--------------|-----------------|----------------|------------------|---|---|-----------|----------|
| | Vero Beach | FL | 32967 | | | | | | |
| | (Ma | iling Ad | ldress of Limi | ted Partnershi | p) | | | | |
| and that the facts s | f perjury I, being duly systated herein are true and | correct | i. | | | | thereof | | |
| Signed this 23 | day of | Mar | General Part | wthe | 200 | 1 4 . | | | |
| | Florida | | | | | | | | |
| COUNTY OF | Indian River | - | | | | | | | |
| On this _ | 231d" day of | Nas | <u>.cb~</u> ,_ | 2004 | | | | | |
| BRADFOR | o L. Chow | 711 E | R,52. | | _, personally ap | ppeared before r | ne, | | |
| who is persona | lly known to me | | | | | | NSC. | 04 | |
| whose identity | I proved on the basis of | | <u></u> | sucing ! | <u>L'erse</u> | <u> </u> | TARRAY TO A STATE OF THE STATE | 35 EVN 96 | |
| | Du | Notary P | ublic Signature | <u> </u> | | | | EMIN: In | ing Sign |
| | | Notary's | Printed Name) | | Á | DEBRA LE MY COMMISSION EXPIRES: Decem Bonded Thru Notary Pu | | | |

My Commission Expires:__

Seal

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

| Dradfond Growth on Ford 1: | - Crowrner, Sr. | | |
|---|--|---|---|
| Bradford Crowther Family a general partner of Limited Partnership | ,a(an) <u>Pennsylvania</u> | | |
| limited partnership, hereinafter referred to as the "Partnership", who cert | ifies as follows: | | |
| 1. The amount of capital contributions of the limited partners is \$ _6_0 | 00.00 | | |
| 2. The anticipated amount of the capital contributions of the limited part | mers that are allocated for the purposes | s of | |
| transacting business in Florida is \$ 6,000.00 | | | |
| Under the penalties of perjury I, being duly sworn, declare that I have re | ead the foregoing and know the conten | its thereof and | |
| that the facts stated herein are true and correct. | | | |
| Signed this 230d day of March 2004, | | | |
| Bureffer J. Comments General Partner | les In | | |
| STATE OF_Florida | | | |
| COUNTY OF Indian River | | | |
| On this 23rd" day of March | , २००५ , | SECK RALLA | |
| BRADFORD L CAROWTHER, SR. | , personally appeared before me, | HASSE HASSE BLASS | |
| who is personally known to me | | | ~ |
| Whose identity I proved on the basis of University | jense | 10 mg 1 mg | |
| | | , , , , , , , , , , , , , , , , , , , | |
| (Notary Public Signature) | | | |
| (Notary's Printed Name) | DEBRA LEE JOBE MY COMMISSION # DD 244365 EXPIRES: December 21, 2007 Bonded Thru Notary Public Underwriters | | |
| Seal My Commission Expires: | Bonded Thru Notary Public Underwriters | į | |