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STATE
DIVISION OF CORPORATION
05 FEB -4 PM 1:36
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FILED
05 FEB -11 PM 1:36
STATE
FLORIDA

DATE: 02-04-05

NAME: PIGLIA FLORIDA PROPERTIES, LTD

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST: \$87.50 + \$8.75= \$96.25- CK ATTACHED

RETURN: GOOD STANDING

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

LP
FILE 2nd

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

FILED
05 FEB -4 PM 1:36
TALLAHASSEE STATE
FLORIDA

1 Piglia Florida Properties, Ltd.
(Name of limited partnership as it is in the home state)

2 _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;
must contain the word "LIMITED" or "LTD.")

3 Ohio 4 01/18/2005
(State of Formation) (Date of Formation)

5 Joseph R. Piglia
(Name of Registered Agent for Service of Process)

6 686 - 103rd Avenue
(Street Address of Registered Office)

Naples Florida 34108
(City) (Zip Code)

7 Acceptance by the Registered Agent for Service of Process:

Joseph R. Piglia
(Agent must sign on this line) Joseph R. Piglia

8 76 South Main Street, Suite 1512

Akron, Ohio 44308

(Address of registered office required in state of formation or, if not required, address of principal office)

9 NAMES OF GENERAL PARTNERS

STREET ADDRESS

Piglia Florida Partners, LLC 4880 Hudson Drive, Stow, Ohio 44224

MO50000700600

10 4880 Hudson Drive, Hudson, Ohio 44224
(Office where Names, Addresses and Contributions of Limited Partners are kept)

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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn

CONTINUED

12 4880 Hudson Drive

Stow, Ohio 44224

(Mailing Address of Limited Partnership)

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 31st day of January, 2005

Piglia Florida Partners, LLC

X By: Peter J. Piglia
General Partner Peter J. Piglia, Manager

STATE OF Ohio

COUNTY OF Summit

On this 31st day of January, 2005

Peter J. Piglia, Manager of Piglia Florida Partners, LLC, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Paula A Walck
(Notary Public Signature)

PAULA A WALCK
(Notary's Printed Name)



PAULA A. WALCK
Resident Summit County
Notary Public, State of Ohio
My Commission Expires 2/16/09

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Peter J. Piglia, Manager of Piglia Florida Partners, LLC
a general partner of Piglia Florida Properties, Ltd., X(an) Ohio
limited partnership, hereinafter referred to as the "Partnership", who 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 \$ 1,000.00

Under the 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 31st day of January, 2005

Piglia Florida Partners, LLC

X By: Peter J. Piglia
General Partner Peter J. Piglia, Manager

STATE OF OHIO

COUNTY OF SUMMIT

On this 31st day of January, 2005

Peter J. Piglia, Manager of
Piglia Florida Partners, LLC, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Paula Walck
(Notary Public Signature)



PAULA A WALCK
(Notary Public)
Resident Summit County
Notary Public, State of Ohio
My Commission Expires: 2/16/09