

BOS0000000258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

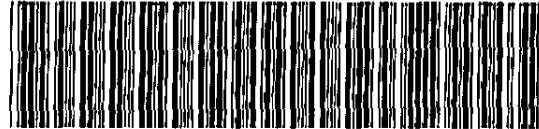
(Document Number)

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Debra GAVE
AUTHORIZATION BY PHONE TO
CORRECT name
DATE 6/14/05
DOC. EXAM.



800054895648

05/24/05--01039--005 **87.50

FILED
05 JUN 13 PM 12:41
SEATTLE
TALLAHASSEE, FLORIDA

DAVID M. ANDREWS

ATTORNEY AT LAW

125 NIX BOAT YARD ROAD

P.O. BOX 5358

ST. AUGUSTINE, FL 32085

TELEPHONE (904) 826-1987

EMAIL andrews@david-m-andrews.com

FAX (904) 826-4286

May 23, 2005

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

Re: Hewlett Enterprises Limited Partnership

Dear Sir/Madam:

Enclosed herewith are the following:

- Application by Foreign Limited Partnership for Authorization to Transact Business in Florida
- Affidavit of Capital Contributions for a Foreign Limited Partnership.
- Certified copy of following Maine documents :
 - Certificate of Limited Partnership
 - 2004 Annual Report
 - Change of Agent and Registered Office
- Filing Fee of \$87.50.

If the Application meets with your approval please send me a copy of the Authorization at your earliest convenience.

Please contact me if you require any additional information.

Respectfully yours,



David M. Andrews

DMA:dds
Enclosures



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 1, 2005

DAVID M. ANDREWS, ATTORNEY AT LAW
P.O. BOX 5358
ST. AUGUSTINE, FL 32085

SUBJECT: HEWLETT ENTERPRISES LIMITED PARTNERSHIP
Ref. Number: W05000027199

We have received your document for HEWLETT ENTERPRISES LIMITED PARTNERSHIP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited partnership is not available. A foreign limited partnership whose name is not available in Florida must adopt another name which contains the words "Limited" or its abbreviation "Ltd." for use in the state of Florida. Please complete number 2 on the application with an alternate name for use in Florida.

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) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 605A00038954

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

1. HEWLETT ENTERPRISES LIMITED PARTNERSHIP
(Name of limited partnership as it is in the home state)
2. HEWLETT ENTERPRISES-CASA BLANCA, LTD
(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. MAINE 4. 12/30/1998
(State of Formation) (Date of Formation)
5. NANCY CLOUD
(Name of Registered Agent for Service of Process)
6. 60 MARINE STREET
(Street Address of Registered Office)
- ST. AUGUSTINE, Florida 32084
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:
Nancy Cloud
(Agent must sign on this line)
8. NANCY CLOUD
60 MARINE STREET, ST. AUGUSTINE, FL 32084
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
- | | |
|----------------------|--|
| <u>NANCY CLOUD</u> | <u>60 MARINE STREET, ST. AUGUSTINE, FL 32084</u> |
| <u>MICHAEL MILES</u> | <u>60 MARINE STREET, ST. AUGUSTINE, FL 32084</u> |
10. 24 AVENIDA MENENDEZ, ST. AUGUSTINE, FL 32084
(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

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TALLAHASSEE, FLORIDA

12. 24 AVENIDA MENENDEZ, ST. AUGUSTINE, FL 32084

(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 26th day of APRIL, 2005

Nancy Cloud
General Partner

STATE OF FLORIDA

COUNTY OF ST. JOHNS

On this 26th day of APRIL, 2005

NANCY CLOUD

, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

SEAL OF THE STATE
TALLAHASSEE, FLORIDA

05 JUN 13 PM 12:41

FILED

David M. Andrews

(Notary Public)
DAVID M. ANDREWS
Notary Public, State of Florida
My Comm. Expires Aug. 5, 2008
Comm. No. DD327779
(Notary's Printed Name)

Seal

My Commission Expires: _____

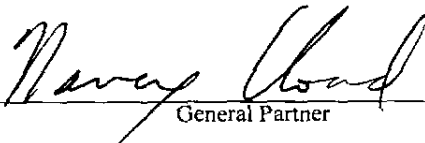
AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared NANCY CLOUD,
a general partner of HEWLETT ENTERPRISES Limited Partnership, a (an) MAINE
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 2000 -.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 2000. -

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 26 day of APRIL, 2005.



General Partner

STATE OF FLORIDA

COUNTY OF ST. JOHNS

On this 26 day of APRIL, 2005.

NANCY CLOUD

_____, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

(Notary Public Signature)

DAVID M. ANDREWS
Notary Public, State of Florida
My Comm. Expires Aug. 5, 2008
(Notary's Printed Name)
Comm. No. DD327779

Seal

My Commission Expires: _____

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