SECRETARY OF STATE

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COVER LETTER

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TO: Registration Section
Division of Corporations

SECRETARY OF SAIDS

SUBJECT: 2020 Video Chice Data Limited Partnership

(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

	Connie Juneau (Contact Person)	en e	
~	2020 Video Voice Data (Firm/Company)	LID	
	3575 Lone Star Circle (Address)	#300	
	Justin, TX 76247 (City, State and Zip Code)		• ••• •
	For further information concerning this ma	atter, please call:	
	Consider Tuneau (Name of Contact Person)		10-0/00 X /// ytime Telephone Number)
	Enclosed is a check for the following amo	,	·
	\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	s \$\int \\$1,052.50 \text{ Filing Fees} and Certified Copy	\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

FILED

SECRETARY OF STATE TALLAHASSEE, FLORIS.

January 20, 2006

CONNIE JUNEAU 3575 LONE STAR CIR. #300 JUSTIN, TX 76247

SUBJECT: 2020 VIDEO DATA LIMITED PARTNERSHIP

Ref. Number: W06000002957

We have received your document for 2020 VIDEO DATA LIMITED PARTNERSHIP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 620.108, Florida Statutes, requires that limited partnership certificates include the mailing address in addition to the principal place of business address. Please correct your document accordingly. If the mailing address and principal place of business are one and the same, please be sure this is clearly reflected in your 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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 706A00004318

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA (Name of Limited Partnership or Limited Liability Limited Partnership, which must include Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. (If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.) (State or Country of Formation) (Name of Registered Agent for Service of Process) (Florida street address for Registered Agent) 6. 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 relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.

8. If limited partnership is a limited liability limited partnership, check box

9	15 Lone Star Circle #300 FILED Tailing address) 1006 FEB 13 A 11: TAILAHASSEE. FLORID TAILAHASSEE. FLORID TAILAHASSEE. FLORID
10. Name, principal office address, and	I mailing address of each general partner:
Borry Willay (Name)	701 Sunny Naven CT (Street Address) HU TX 75077
	(Mailing Address)
William Rowland (Name)	702 Winding Bench Hy (Street Address)
	(Mailing Address)
Jason Green (Name)	702 Winding Bend HU Tx (Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)

(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
1. Effective date, if other than the date of file	$ing: \frac{\theta-17-05}{\theta-17-05}$
	more than 90 days after the date this document is
Effective date cannot be prior to nor filed by the Florida Department of Standard St	more than 90 days after the date this document is
Effective date cannot be prior to nor filed by the Florida Department of Standard Standard Standard Standard Standard State or other official having custody aw of which it is organized.	more than 90 days after the date this document is ate.) ace duly authenticated, not more than 90 days prior the Florida Department of State, by the Secretary of

\$52.50 \$8.75

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Filing Fees: Certified Copy (optional): Certificate of Status (optional): Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Roger Williams Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Limited Partnership for 2020 Video Voice Data, Ltd (filing number: 800532956), a Domestic Limited Partnership (LP), was filed in this office on August 17, 2005.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 05, 2006.



Roger Williams Secretary of State