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Federal Tax Consultation/Representation

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\*\*\*\*113.75 \*\*\*\*113.75

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96 MAR -4 PM 11:30  
STATE  
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
Name	Other 2/22/96
Availability	Dec

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

Name Availability

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

Voluntary Acknowledgement	DCC
Vol. P. Verifier	DCC

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

(cus)

72  
\$10,000.00

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FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

February 22, 1996

AMERCOMP  
RICHARD A. RANDALL CPA PC  
4320 N. WALNUT  
MUNCIE, IN 47303

SUBJECT: SAN LUCAS FAMILY LIMITED PARTNERSHIP  
Ref. Number: W96000003992

We have received your document for SAN LUCAS FAMILY LIMITED PARTNERSHIP and your check(s) totalling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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 (904) 487-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 596A00007721

Florida Department of State, Sandra B. Mortham, Secretary of State

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

1. San Lucas Family Limited Partnership  
(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. Indiana 4. November 25, 1995  
(State of Formation) (Date of Formation)

5. Richard A. Randall, CPA  
(Name of Registered Agent for Service of Process)

6. 14331 S Tamiami Trail  
(Street Address of Registered Office)

Fort Myers, Florida 33916  
(City) (Zip Code)

⑦ Acceptance by the Registered Agent for Service of Process.

*RA Randall*  
(Agent must sign on this line)

8. 14331 S Tamiami Trail, Fort Myers, FL 33916  
(Address of registered office required in state of formation or, if not required, address of principal office.)

**9. NAMES OF GENERAL PARTNERS**

**STREET ADDRESS**

Miguel Ruiz	951 N. Arcadia Ave.
Lucy Ruiz (MA. Lucila Ruiz) Miguel Ruiz, Jr.	Arcadia, FL. 33821
Ponciano M. Ruiz Thomas A. Ruiz Liliana P. Ruiz	
Anna P. Ruiz Michellian Ruiz	

10. \_\_\_\_\_  
(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 cancelled or withdrawn.

CONTINUED

12. PO Box 310  
Nuncie, IN 47308  
(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.

This day of 1, February, 19 96.

X Miguel Ruiz General Partner

STATE OF FLORIDA

COUNTY OF DESOTO

On this 6 day of FEBRUARY, 19 96, Miguel Ruiz

personally appeared before me,

☐ who is personally known to me

☒ whose identity I proved on the basis of \_\_\_\_\_

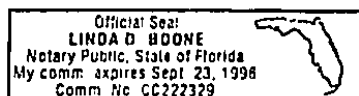
CPA's Affidavit

Linda D. Boone  
(Notary Public Signature)

LINDA D. BOONE

(Notary's Printed Name)

Seal



My Commission Expires: SEPTEMBER 23, 1996

Commission Number CC222329

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

BEFORE ME the undersigned personally appeared Miguel Ruiz,  
a general partner of San Lucas, a (an) Indiana limited partnership,  
hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 10,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 10,000.

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.

This 6 day of FEBRUARY, 19 96.

X Miguel Ruiz  
General Partner

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STATE OF FLORIDA  
TALLAHASSEE

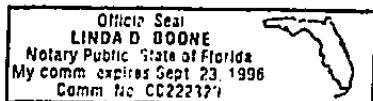
STATE OF FLORIDA

COUNTY OF DESOTO

On this 6 day of FEBRUARY, 19 96, Miguel Ruiz  
personally appeared before me, ☐ who is personally known to me

☒ whose identity I proved on the basis of \_\_\_\_\_

\_\_\_\_\_  
CPA's Affidavit



Linda D. Boone  
(Notary Public Signature)  
LINDA D. BOONE  
(Notary's Printed Name)

Seal

My Commission Expires: SEPTEMBER 23, 1996  
Commission Number CC222329