

B96000000168

Celine Marie Nees

Requestor's Name

1015 Munster Avenue

Address

Glendale IL 60033

City/State/Zip

Phone #

FILED

96 MAY 13 PM 1:21

FILED

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Seine Limited Partnership B96000000168
(Corporation Name) (Document #)

2. _____ 000001745670
(Corporation Name) (Document #) -03715736-01136-001
+++1785.00 +++1785.00

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

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

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

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

w9600000590+

Document	KV
Examiner	
Updated	
Revised	
Amended	
Other	



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 19, 1996

CELINA MARIA MEES
1015 MUNSTER AVENUE
ORLANDO, FL 32803

SUBJECT: SEINE LIMITED PARTNERSHIP
Ref. Number: W96000005901

We have received your document for SEINE LIMITED PARTNERSHIP and your check(s) totaling \$1785.00. 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.

The registered agent must sign accepting the designation.

Every corporation, limited partnership, general partnership, or trust listed as a general partner of a limited partnership or a managing member or manager of a limited liability company must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Section 620.108, Florida Statutes, requires the affidavit include the amount of capital contributions of the limited partners and the amount anticipated to be contributed.

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) 487-6967.

Kenny Manning
Corporate Specialist

Letter Number: 096A00012473

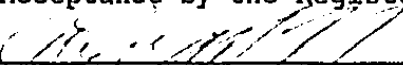
Florida Department of State, Sandra B. Northam, Secretary of State

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

FILED

95 MAY 13 PM 4:21

SECRET
STATE
TALLAHASSEE, FLORIDA

1. SEINE 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. NEW HAMPSHIRE 4. 10/6/1995
(State of Formation) (Date of Formation)
5. CELINA MARIA MEES
(Name of Registered Agent for Service of Process)
6. 1015 MUNSTER AVENUE
(Street Address of Registered Office)
ORLANDO, Florida 32803
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process.

(Agent must sign on this line)
8. 1015 MUNSTER AVENUE, ORLANDO, FLORIDA 32803
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
CELINA MARIA MEES, 1015 Munster Ave., Orlando, FL
TRUSTEE OF SEINE MANAGEMENT TRUST
10. 1015 Munster Avenue, Orlando, Florida 32803
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

CONTINUED

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.
12. 1015 Munster Avenue, Orlando, Florida 32803
(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 10 day of May, 1996.



CELINA MARIA MEES, TRUSTEE OF
SEINE MANAGEMENT TRUST, General Partner

STATE OF FLORIDA
COUNTY OF POLK

On this 10 day of May, 1996, CELINA MARIA MEES, TRUSTEE OF SEINE MANAGEMENT TRUST personally appeared before me, whose is personally known to me or whose identity I proved on the basis of a valid Florida Driver's License.

(SEAL)



NOTARY PUBLIC



MARGIE MCCOY
My Commission CC407706
Expires Jul 28, 1996

☒ ☐ ☒

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

BEFORE ME the undersigned personally appeared CELINA MARIA MEES, AS TRUSTEE OF SEINE MANAGEMENT TRUST, a general partner of SEINE LIMITED PARTNERSHIP, a New Hampshire limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$250,000.00.

2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$250,000.00.

Under the penalties 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 10 day of May, 1996.



CELINA MARIA MEES, TRUSTEE OF
SEINE MANAGEMENT TRUST, General Partner


STATE OF FLORIDA
COUNTY OF POLK

On this 10 day of May, 1996, CELINA MARIA MEES, TRUSTEE OF SEINE MANAGEMENT TRUST personally appeared before me, whose is personally known to me or whose identity I proved on the basis of a valid Florida Driver's License.

(SEAL)



MARGIE MCCOY
My Commission CC407705
Expires Jul. 28, 1999



NOTARY PUBLIC