

**B97000000396**

Requester's Name

**GREENBAX ENTERPRISES, INC.**

**P.O. BOX 118048  
CHARLESTON, S.C. 29423**

none #

**800003220508--2  
-04/24/00--01035--006  
\*\*\*\*\*52.50 \*\*\*\*\*52.50**

Office Use Only

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

1. \_\_\_\_\_  
(Corporation Name) (Document #)

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(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

**B97-396**

Name	<i>[Signature]</i>
Available	<i>[Signature]</i>
Document	<i>[Signature]</i>
Exhibit	<i>[Signature]</i>
Register	<i>[Signature]</i>
W. P.	<i>[Signature]</i>

**Examiner's Initials**

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

The undersigned general partners of FLORVEST FIVE, LIMITED PARTNERSHIP,

a (an) GEORGIA

Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.176,  
Florida Statutes. The total amount of the capital contributions of the limited partners that is  
allocated for the purpose of transacting business in Florida is: \$ 6,007.50.

Signed this 21st day of APRIL, 19x 2000.

***FURTHER AFFLIANT SAYETH NOT.***

*Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to  
the best of my knowledge and belief.*

General Partner

ESD, PROPERTIES, INC. *[Signature]*

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**FEES:**

\$7 per \$1,000 based on the additional contributions  
(Minimum \$52.50 - Maximum \$1,750.00)

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 6, 2000

FLORVEST FIVE, LIMITED PARTNERSHIP  
P. O. BOX 118048  
CHARLESTON, SC 29423

SUBJECT: FLORVEST FIVE, LIMITED PARTNERSHIP  
Ref. Number: B97000000396

We have received your document for FLORVEST FIVE, LIMITED PARTNERSHIP and check(s) totaling \$141.25. However, your check(s) and document are being returned for the following:

You have indicated in block 10 or 7b on the document that the contributions of the limited partners have gone beyond what we currently have on file. A supplemental affidavit must be filed pursuant to chapter 620, Florida Statutes. The filing fee is based on the additional amount of contributions calculated at a rate of \$7 per \$1000 with a minimum filing fee of \$52.50 and a maximum filing fee of \$1750.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6051.

Registration/Qualification Section  
Division of Corporations Letter Number: 600A00018996

52.50 }  
141.25 }

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