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00789-00717-00671

CORPORATION NAME(S) AND DOCUMENT NUMBER(S) (if known):

*Stuper Family Limited Partnership CM*

*File 2nd*

FILED  
93 OCT -9 PM 3:40  
TALLAHASSEE, FLORIDA

- Walk In
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NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
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<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 checked="" type="checkbox"/>	Foreign <i>LLP LLP</i>
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

- Certificate of FICTITIOUS NAME
- FICTITIOUS NAME SEARCH
- CORP SEARCH

700002656887--6  
-10/06/98--01048--015  
\*\*\*1321.25 \*\*\*1321.25

Ordered By:

*WAS-22757*

Date:

*LP-1260.00  
Cert 61.25*



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

October 6, 1998

UCC FILING & SEARCH SERVICES

SUBJECT: HARPER FAMILY LIMITED PARTNERSHIP  
Ref. Number: W98000022757

We have received your document for HARPER FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1321.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership 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.

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) 487-6967.

Michelle Hodges  
Document Specialist

Letter Number: 898A00049746

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

98 OCT -8 PM 3:40

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

1. Harper 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. Louisiana 4. December 24, 1997  
(State of Formation) (Date of Formation)

5. Russell Blankenship  
(Name of Registered Agent for Service of Process)

6. 1733 Hill Avenue  
(Street Address of Registered Office)

Mangonia Park, Florida 33407  
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

*R.A. Blankenship*  
(Agent must sign on this line)

8. 70393 Bravo Street, Covington, LA 70433

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

Crescent City/Harper Properties, L.L.C., 70393 Bravo Street, Covington, LA 70433

10. 70393 Bravo Street, Covington, LA 70433  
(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. 70393 Bravo Street, Covington, LA 70433

(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 5th day of October, 19 98

Crescent City/Harper Properties, L.L.C.

By: Jack (B.) Harper, Member/Manager

*Jack B. Harper*  
General Partner

STATE OF Louisiana

Parish

COUNTY OF St. Tammany

On this 5th day of October, 19 98

Jack B. Harper

personally appeared before me,

who is personally known to me

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

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TAMMISSEE, FLORIDA

*William A. Neilson*

(Notary Public Signature)

William A. Neilson

(Notary's Printed Name)

Seal My Commission Expires: at death.

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

Crescent City/Harper Properties, L.L.C.

BEFORE ME the undersigned personally appeared By: Jack B. Harper, Member/Manager

a general partner of Harper Family Limited Partnership, a (an) Louisiana

limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

- 1. The amount of capital contributions of the limited partners is \$ 4,900,000
- 2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 175,000

*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.*

Signed this 5th day of October, 1998

Crescent City/Harper Properties, L.L.C.

By: Jack B. Harper, Member/Manager

*Jack B. Harper*  
General Partner

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TAMMASHAWE FL 7000

STATE OF Louisiana

Parish St. Tammany  
COUNTY OF

On this 5th day of October, 1998

Jack B. Harper, personally appeared before me,

who is personally known to me

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

*William A. Neilson*  
(Notary Public Signature)

William A. Neilson  
(Notary's Printed Name)

Seal

My Commission Expires: at death.