

# B99 000000083

CAPITOL SERVICES d/b/a  
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)

1406 Hays Street, Suite 2

(Address)

Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
59 FEB 23 PM 1:44

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

1. Easton & Co., L.P.  
(Corporation Name)

(Document #)

Name

2. \_\_\_\_\_  
(Corporation Name)

(Document #)

Availability

3. \_\_\_\_\_  
(Corporation Name)

(Document #)

Signature

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

(Document #)

Signature

☒ Walk in

☒ Pick up time 2/19

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

Signature  
W. P. [Signature]

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

4000002780804--3  
-02/19/99-01063-003  
\*\*\*\*437.50 \*\*\*\*437.50

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

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

LP-385.00  
CERT 52.50

Examiner's Initials



*Resubmit*

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

February 19, 1999

CAPITOL SERVICES

TALLAHASSEE, FL

SUBJECT: S. EASTON & CO. (SECURITIES) LTD.  
Ref. Number: W99000004305

We have received your document for S. EASTON & CO. (SECURITIES) LTD. and your check(s) totaling \$437.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$437.50 payment.

Before this limited partnership can be filed, its corporate general partner -- STANLEY EASTON, INC. -- will have to be qualified in Florida.,

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) 487-6914.

Buck Kohr  
Corporate Specialist

Letter Number: 599A00007749

RECEIVED

99 FEB 23 AM 11:07

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32314

99 FEB 23 PM 1:44

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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

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

1. EASTON & CO. L.P.  
(Name of limited partnership as it is in the home state)

2. S. EASTON & CO. (securities) Ltd.  
(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 YORK 4. JULY 19, 1978  
(State of Formation) (Date of Formation)

5. UNITED CORPORATE SERVICES INC.  
(Name of Registered Agent for Service of Process)

6. 9200 South Dadeland Blvd. - Suite 508  
(Street Address of Registered Office)  
Miami, Florida 33156  
(City) (Zip Code)

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

Michael A. Barr Michael A. Barr, President  
(Agent must sign on this line)

8. 1 PARKER PLAZA, FORT LEE, NEW JERSEY 07024  
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS STREET ADDRESS

Stanley Easton, Inc. F99-1024 1 Parker Plaza, Fort Lee, New Jersey 07024.

Steven W. Hahn 1 Parker Plaza, Fort Lee, New Jersey 07024

10. One Parker Plaza, Fort Lee, New Jersey 07024  
(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.

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12. One Parker Plaza

Fort Lee, New Jersey

(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 29, January, 19 99

Stanley Easton  
General Partner

STATE OF New York

COUNTY OF New York

On this 29<sup>th</sup> day of January, 19 99, Stanley Easton

personally appeared before me,

☒ who is personally known to me

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

99 FEB 23 PM 1:45  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Allan S. Sexter

(Notary Public Signature)

ALLAN S. SEXTER

Notary Public, State of New York

(Notary's Printed Name)

Qualified in Nassau County

Commission Expires March 30, 1999

Seal

My Commission Expires: \_\_\_\_\_

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

BEFORE ME the undersigned personally appeared \_\_\_\_\_,  
a general partner of Easton & Co., a (an) New York limited partnership,  
hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 16,750,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 50,000.

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 29 day of January, 19 99

  
\_\_\_\_\_  
General Partner

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DIVISION OF CORPORATIONS

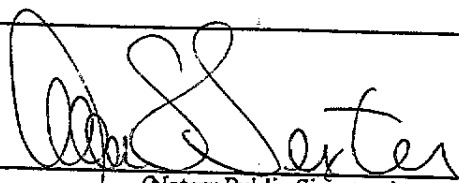
STATE OF New York

COUNTY OF New York

On this 29 day of January, 19 99, Stanley Easton

personally appeared before me,

- ☒ who is personally known to me  
☐ whose identity I proved on the basis of \_\_\_\_\_

  
\_\_\_\_\_  
(Notary Public Signature)  
ALLAN S. SENTER  
Notary Public, State of New York  
No. 30-3602330  
(Notary's Printed Name)  
Commission Expires March 30, 1999

Seal

My Commission Expires: \_\_\_\_\_