Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000158796 3)))

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: CORPORATION SERVICE COMPANY

Account Number : I20000000195

Phone

Fax Number (850) 558-1575

(850) 521-1000

DIVISION OF CORPORATION

FLORIDA/FOREIGN LP/LLP

Nagel Family Properties Limited Liability Limited Pa

Certificate of Status	0
Certified Copy	0
Page Count	92 -3
Estimated Charge	\$1,000.00

Electronic Filing Menu

Corporate Filing Menu

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CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

(Name of Limited Partnership or Limited Limited Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited L.P., L.P. or Lid. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
2. 19452 Pinetree Drive Jupiter, FL 33469 (Street address of initial designated office)
3. Attorney Barbara Le Wolf (Name of Registered Agent for Service of Process)
4. 1340 U.S. Highway One (Florida strebs didress for Registered Agent) Tupiter FL 39469
5. I hereby accept the appointment as registered agent and agrae to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.
Signature of Registered Agent
6. 19452 Pinetree Drive Jupiter, FL 33469 (Mailing address of initial designated office)
7. If limited partnership elects to be a limited liability limited partnership, check box

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Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered ABART OF STATE Page 2 of 2	APPROVID
Signature of each general partner: Aurelio A. Moral	es Aprelia A OMprales	
	f June 2006	
(Effective date cannot be prior to no filed by the Florida Department of S	r more than 90 days after the date the document is State.)	
9. Bffective date, if other than the date of f	iling:	
	,	
· · · · · · · · · · · · · · · · · · ·		
	Jupiter, FL 33469	
Aurelio A. Monal		
8. Name and business address of ea Name:	Eusiness Address:	