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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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A07-1013
OR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jen-lan Chuang Limited Partnership
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Machiavelli W. Chao
(Contact Person)
Law Offices of Machiavelli W. Chao
(Firm/Company)
2882 Walnut Avenue, Suite C
(Address)
Tustin Ranch, California 92780
(City, State and Zip Code)

For further information concerning this matter, please call:

Machiavelli W. Chao at (714) 669-8899
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
- \$1,008.75 Filing Fees and Certificate of Status
- \$1,052.50 Filing Fees and Certified Copy
- \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

CR2E030 (01/06)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. Jen-lan Chuang Limited Partnership

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.*

2. 4132 Key Thatch Circle

(Street address of initial designated office)

3. Shinn-Fu Chuang

(Name of Registered Agent for Service of Process)

4. 4132 Key Thatch Circle

(Florida street address for Registered Agent)

Tampa, Florida 33610-9029

5. *I hereby accept the appointment as registered agent and agree 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. 2882 Walnut Avenue, Suite C

(Mailing address of initial designated office)

Tustin Ranch, California 92780

7. If limited partnership elects to be a limited liability limited partnership, check box

8. Name and business address of each general partner:

Name:

Business Address:

Shinn-Fu Chuang

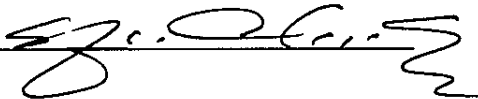
2882 Walnut Avenue, Suite C
Tustin Ranch, California 92780

9. Effective date, if other than the date of filing: _____.

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Signed this 13th day of August, 2007.

Signature of each general partner:



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TALLAHASSEE, FLORIDA

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Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75