

Division of Corporations

Page 1

A0800000315

Florida Department of State
Division of Corporations
Public Access System

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.

((H08000070306 3))



H080000703063ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : UCC FILING & SEARCH SERVICES, INC.
Account Number : 119980000054
Phone : (850) 681-6528
Fax Number : (850) 681-6011

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
08 MAR 24 AM 11:05

RECEIVED

08 MAR 24 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LP/LLLP

R M Partners I, LLLP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$1,052.50

Electronic Filing Menu

Corporate Filing Menu

Help

G. MCLEOD
MAR 25 2008
EXAMINER

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

1. R M Partners I, LLLP

*(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. 300 S.E. 5th Avenue Apt. 1060
(Street address of initial designated office)


Boca Raton, FL 33432

3. Thomas O. Katz
(Name of Registered Agent for Service of Process)

4. 2255 Glades Road, Suite 240W
(Florida street address for Registered Agent)

Boca Raton, FL 33431

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.

Thomas O. Katz
by: 
Signature of Registered Agent

6. 300 S.E. 5th Avenue Apt. 1060
(Mailing address of initial designated office)

Boca Raton, FL 33432

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
08 MAR 24 AM 11:05
19

8. Name and business address of each general partner:

Name:

Business Address:

Richard P. Morgenstern

300 S.E. 5th Avenue Apt. 1060

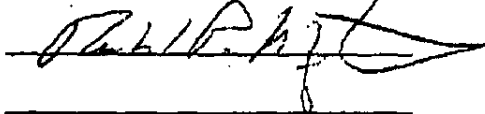
Boca Raton, FL 33432

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 18th day of MARCH, 2008

Signature of each general partner



Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75