# A08000000597

| (Red                      | questor's Name)   |           |
|---------------------------|-------------------|-----------|
| (Add                      | dress)            |           |
| (Add                      | dress)            |           |
| (City                     | //State/Zip/Phone | · #)      |
| PICK-UP                   | ☐ WAIT            | MAIL      |
| (Bus                      | siness Entity Nam | ne)       |
| (Dod                      | cument Number)    |           |
| Certified Copies          | Certificates      | of Status |
| Special Instructions to F | iling Officer:    |           |
| A.                        | LUNT              |           |
| JU                        | N 1 2 2008        | 1         |
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Office Use Only



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RECRETARY OF STATE OF LORIDA

FILED

#### **COVER LETTER**

| TO: Registration Section Division of Corporations   |                                       |
|---|---------------------------------------|
| SUBJECT: S & J LIMITED PARTNERSHE   | )                                     |
| (Name of Resulting Florida Part   |                                       |
| The enclosed Certificate of Conversion, Partnership Resubmitted to convert an "Other Organization" into a Flowith s. 620.8914, F.S. |                                       |
| Please return all correspondence concerning this matter   | to:                                   |
| JOSEPH RAY  |                                       |
| (Contact Person)  | <del></del>                           |
|   | TALL SE                               |
| (Firm/Company)  | LCR!                                  |
| 2804 N 46TH AVENUE - No. C-526  | TASA UN                               |
| (Address)   | SRY —                                 |
| Hollywood, FL 33021-2950  |                                       |
| (City, State and Zip Code)  | RECRETARY OF STATE LLAHASSEE. FLORIDA |
| For further information concerning this matter, please of   | eall:                                 |
| JOSEPH RAY at ( 954   | 987.9898                              |
| (Name of Contact Person) (Area  | Code and Daytime Telephone Number)    |
| Enclosed is a check for the following amount:   |                                       |
| \$75.00 Filing Fees \$83.75 Filing Fees \$127.50 F and Certificate of \$50.00 for Partnership) Status                               |                                       |

### STREET ADDRESS:

### MAILING ADDRESS:

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

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



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 21, 2008

JOSEPH RAY 2804 N 46 AVE. NO. C-526 HOLLYWOOD, FL 33021-2950

SUBJECT: S & J LIMITED PARTNERSHIP

Ref. Number: W08000019978

We have received your document for S & J LIMITED PARTNERSHIP and your check(s) totaling \$136.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions 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) 245-6094.

Agnes Lunt Regulatory Specialist II Letter Number: 608A000237# GP LL CRETTARY OF THE PROPERTY OF T



### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 20, 2008

JOSEPH RAY 2804 N 46 AVE. NO. C-526 HOLLYWOOD, FL 33021-2950

SUBJECT: S & J LIMITED PARTNERSHIP

Ref. Number: W08000019978

We have received your document for S & J LIMITED PARTNERSHIP. However, the document has not been filed and is being returned for the following:

Please accept our apology for failing to mention this in our previous letter.

The limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

The document number of the name conflict is L04000042553.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 008A00031850

## Certificate of Conversion For

### "Other Business Organization" Into

### Florida Limited Partnership or Limited Liability Limited Partnership

| This Certificate of Conversion and attached Certificate of Limited Partnership are  |
|---|
| submitted to convert the following "Other Business Entity" into a Florida Limited   |
| submitted to convert the following "Other Business Entity" into a Florida Limited  Partnership or Limited Liability Limited Partnership in accordance with s.620-2604,  Florida Statutes. |
| Florida Statutes.   |
|   |
| 1. The name of the "Other Business Entity" immediately prior to the filing of this SEE Certificate of Conversion is:  |
| Certificate of Conversion is:   |
| STILIMITED PARTNERSHIP  |
| (Enter Name of Other Business Entity)   |
| 2. The "Other Business Entity" is a LIMITED PARTNERSHAP  (Enter entity type. Example: corporation, limited liability company, sole  |
| proprietorship, general partnership, common law or business trust, etc.)  |
|   |
| first organized, formed or incorporated under the laws of STATE OF /LL/NO/S   |
| (Enter state, or if a non-U.S. entity, the name of the country)   |
| on Jan 1, 1998  |
| (Enter date "Other Business Entity" was first organized, formed or incorporated)  |
|   |
| 3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership   |
| as set forth in the attached Certificate of Limited Partnership:  |
| SAT BAY LIMITED PARTERSHIP  |
| (Enter Name of Florida Limited Partnership or Limited Liability Limited   |
| Partnership)  |

5. If not effective on the date of filing, enter the effective date: Feb 25 2008 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Limited Partnership, if an effective date is listed therein.)

such a manner that complied with the converting organization's governing law.

Signature of Each General Partner-Listed in Attached Certificate of Limited Partnership:

Fees:

Certificate of Conversion:

52.50

Fees for Florida Certificate of Limited Partnership: \$1,000.00

(\$965 Filing Fee and \$35 Filing Fee)

Certified Copy:

52.50 (Optional)

Certificate of Status:

\$ 8.75 (Optional)

### CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR

### LIMITED LIABILITY 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.P. or LLLP.

2. 2804 N. 46th AVE. APT. C-526

(Street address of initial designated office)

HOLLYWOOD, F.L. 3302/

3. JOSEPH RAY

(Name of Registered Agent for Service of Process)

4. 2804 N. 46th AVE. APT CASS 6

(Florida street address for Registered Agent)

5. I hereby accept the appointment as registered agent and agree to act in this capacity. Therefore accomply with the provisions of all statutes relative to the proper and complete performance of my divides, and I am familiar with and accept the obligations of my position as registered agent.

6. 2804 N. 46th AVE. APT C-526

(Mailing address of initial designated office)

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: OSEPH RAY SYLVIA RAY -YWOOD FL, 33021 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 \_\_\_ \_\_\_ day of \_\_\_\_\_\_\_ 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

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