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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Chetumal Holdings, L				
(Name of Florida Limited Partnershi	ip or Limited Liability Limited Partnership)			
The enclosed Certificate of Limited Partner	ership and fees are submitted for filing.			
Please return all correspondence concerning	ng this matter to:			
Nicolas Montes, Esq.				
(Contact Person)	,			
Marcell Felipe P.A.				
(Firm/Company)				
1401 Brickell Avenue				
(Address)				
Miami, FL 33131				
(City, State and Zip Code)				
· .	•			
For further information concerning this matter, please call:				
Nicolas Montes	at (305) 381-8500			
(Name of Contact Person)	(Area Code and Daytime Telephone Number)			
Enclosed is a check for the following amou	int:			
\$1,000,00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) \$2,008.75 Filing Fees and Certificate of Status	\$1,052.50 Filing Fees and Certified Copy Certified Copy, and Certificate of Status			
STREET ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building 2661 Executive Center Circle	P. O. Box 6327 Tallahassee, FL 32314			
Tallahassee, FL 32301	1 WIXWANDSONS 1 D 32317			
CR2E030 (01/06)				

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

Chetumal Holdings L.P. (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 Candelaria 15 Los Frailes (Street address of initial designated office) San Miguel de Allende, Guanajuato Mexico CP 37-790 3 Nicolas Montes ---(Name of Registered Agent for Service of Process) 4 1401 Brickell Avenue Suite 500 (Florida street address for Registered Agent) Miami, FL 33131 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 abligations of my position as registered agent. 6, 9902 Crystal Court BC 2323 Suite 107 (Mailing address of initial designated office) Laredo, TX 78045-6739 7. If limited partnership elects to be a limited liability limited partnership, check box

Name:	Business Address:	
Spanish Lake Properties Co.	Candelaria 15 Los Frailes	
	San Miguel de Allende, Guanjuato	
	Mexico CP 37-790	
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9. Effective date, if other than the date of filing:		
(Effective date cannot be prior to nor mo filed by the Florida Department of State.,	re than 90 days after the date the document is)	
Signed this 35 th day of	Jine Jos.	
Signature of each general partner:		
frest till de Smill	ake Paperlias Co	
1 '		
Certified Copy (options): \$52	000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) .50	
Certificate of Status (optional): \$8.0	75 age 2 of 2	