

A120000000346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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06/13/12--01008--026 **1061.25

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
JUN 18 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southern Investments Partnership, LLLP
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:

Samuel J. Cantor, Esq.
Contact Person

Samuel J. Cantor, P.A.
Firm/Company

2499 Glades Road, Ste. 210
Address

Boca Raton, FL 33431
City, State and Zip Code

samcanpa@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samuel J. Cantor at (561) 982-9555
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 Fees, 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)

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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

1. Southern Investments Partnership, 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. 2499 Glades Road, Suite 210

(Street address of initial designated office)

Boca Raton, FL 33431

3. Samuel J. Cantor, Esq.

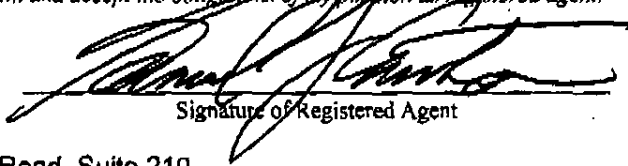
(Name of Registered Agent for Service of Process)

4. 2499 Glades Road, Suite 210

(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.



Signature of Registered Agent

6. 2499 Glades Road, Suite 210

(Mailing address of initial designated office)

Boca Raton, FL 33431

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

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DEPARTMENT OF STATE

8. Name and business address of each general partner:

Name:

Business Address:

Alpine Holdings, Inc.

6761 W. Indiantown Road, #29

Jupiter, FL 33458

P12000013977

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 June, 2012

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.135, F.S.

By: [Signature]
ALPINE HOLDINGS, INC.
ROBERT BLATT, PRESIDENT & SECT.

DEPARTMENT OF STATE
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2012

SAMUEL J. CANTOR, ESQ.
2499 GLADES ROAD
SUITE 210
BOCA RATON, FL 33431

SUBJECT: SOUTHERN INVESTMENT PARTNERSHIP, LLLP
Ref. Number: W12000032408

We have received your document for SOUTHERN INVESTMENT PARTNERSHIP, LLLP and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must contain the name and business address of each general partner. (Note: All non-individual general partners must have an active registration with the Florida Dept. of State.)

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) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 612A00016726