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PICK-UP WAIT MAIL

(Business Entity Name)

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J. Stivers APR 09 2014

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14 APR -8 AM 9:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Valencia Partners, L.P.

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:

Carlos A. Marin, Esq.

Contact Person

Mellaw Registered Agents, LLC

Firm/Company

2601 S. Bayshore Drive, Suite 850

Address

Coconut Grove, FL 33133

City, State and Zip Code

info@mellawyers.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos A. Marin at (305) 444-5969

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

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

1. Valencia Partners, 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. 8200 NW 27th Street
(Street address of initial designated office)

Miami, FL 33122

3. Mellaw Registered Agents, LLC
(Name of Registered Agent for Service of Process)

4. 2601 S. Bayshore Drive, Suite 850
(Florida street address for Registered Agent)

Coconut Grove, FL 33133

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. c/o Mellawyers Registered Agents, LLC
(Mailing address of initial designated office)

2601 S. Bayshore Drive, Suite 850, Coconut Grove, FL 33133

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

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TALLAHASSEE, FLORIDA
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8. Name and business address of each general partner:

Name:

Business Address:

Valencia General Partner, LLC

8200 NW 27th Street

Miami, FL 33122

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 6th day of March, 2014

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.817.155, F.S.

Valencia General Partner, LLC

by: Alirio Torrealba, manager.

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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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