

A 16 0000000626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

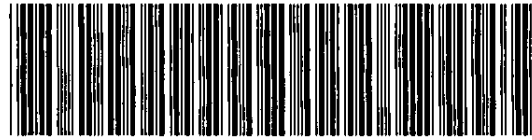
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
W 16-74656

Office Use Only



300291823983

11/02/16--01018--007 **1000.00

2016 NOV -9 P 3: 19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

NOV 10 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 3, 2016

PATRICK M. O'CONNOR, ESQ.
2240 BELLEAIR ROAD, SUITE 115
CLEARWATER, FL 33764

SUBJECT: LUKAS LIMITED PARTNERSHIP
Ref. Number: W16000074656

We have received your document for LUKAS LIMITED PARTNERSHIP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 L16000192467 LUKA LLC.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 416A00023704



O'CONNOR LAW FIRM
YOUR PERSONAL ATTORNEY

727-539-6800
727-536-5936

2240 Belleair Road, Suite 115
Clearwater, FL 33764

yourpersonalattorney.com

pat@yourpersonalattorney.com

November 8, 2016
File No.: 5923-0100

Division of Corporations
Attn: Registration Section
P.O. Box 6327
Tallahassee, Florida 32314

RE: Lukas 1 Limited Partnership

To Whom It May Concern:

Enclosed please find your letter dated November 3, the signed original and one signed copy of the corrected Certificate of Limited Partnership with regard to the above referenced matter. You have our check in the amount of \$1,000.00 for the filing fees of the Certificate of Limited Partnership. Please mail me the copy of the Certificate of Limited Partnership with the appropriate stamped information in the enclosed self addressed stamped envelope.

If you have any questions, please do not hesitate to call us the undersigned at (727) 539-6800.

Very truly yours,

O'CONNOR LAW FIRM

Patrick M. O'Connor, Esquire

PMO/psb
Enclosures

RECEIVED
2016 NOV 10 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



O'CONNOR LAW FIRM
YOUR PERSONAL ATTORNEY

☎ 727-539-6800
☎ 727-536-5936

2240 Belleair Road, Suite 115
Clearwater, FL 33764

yourpersonalattorney.com

pat@yourpersonalattorney.com

October 31, 2016
File No.: 5923-0100

Division of Corporations
Attn: Registration Section
P.O. Box 6327
Tallahassee, Florida 32314

RE: Lukas Limited Partnership

To Whom It May Concern:

Enclosed please find the signed original and one signed copy of the Certificate of Limited Partnership with regard to the above referenced matter. We have also enclosed a check in the amount of \$1,000.00 for the filing fees of the Certificate of Limited Partnership. Please mail me the copy of the Certificate of Limited Partnership with the appropriate stamped information in the enclosed self addressed stamped envelope.

If you have any questions, please do not hesitate to call us the undersigned at (727) 539-6800.

Very truly yours,

O'CONNOR LAW FIRM

Patrick M. O'Connor, Esquire

PMO/psb
Enclosures

CERTIFICATE OF LIMITED PARTNERSHIP
OF
LUKAS 1 LIMITED PARTNERSHIP

The undersigned, desire to form a limited partnership under the Florida Revised Uniform Limited Partnership Act as set forth in Florida Statute §620.1201 et. al., make the following certificate:

1. The name of the limited partnership shall be: ^{LUKAS 1} LIMITED PARTNERSHIP.
2. The Limited Partnership is created and formed for the purpose of engaging in all lawful business.
3. The street mailing address, location of the office and principal place of business for the limited partnership shall be 3411 FORELOCK ROAD, TARPON SPRINGS, FLORIDA 34688.
4. The name and business address of the general partner is WQM, LLC, whose business address is 3411 FORELOCK ROAD, TARPON SPRINGS, FLORIDA 34688.
5. The partnership shall be perpetual.
6. The registered agent and its address for service of process as required by Florida Statute §620.1114 for the limited partnership shall be:

O'CONNOR LAW FIRM
2240 BELLEAIR ROAD, SUITE 115
CLEARWATER, FL 33764

The undersigned shall serve as a Registered Agent until otherwise removed or he shall resign pursuant to the laws of the State of Florida.

Under penalties of perjury we declare that we have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 24 day of OCTOBER, 2016.

WITNESSES:

General Partner

WQM, LLC, a Florida
limited liability company as general partner

C. Salickis
Katrina K. Mashvashis

By:

Maria K. Bownlin
MARIA K. BOWNLIN, its Manager

FILED
2016 OCT - 9 PM 3:19
CLERK OF STATE
TARPON SPRINGS
FLORIDA

STATE OF FLORIDA)
COUNTY OF PINELLAS) S.S.

The foregoing instrument was acknowledged before me this 24 day of OCTOBER, 2016, by MARIA K. BOWLIN as Manager of WQM, LLC, as general partner, on behalf of the LUKAS LIMITED PARTNERSHIP, a Florida Limited Partnership. He is personally known to me or has produced _____ as identification and did take an oath.



Jacqueline Newcomer
Notary Public
State of Florida
My Commission Expires:

Acknowledgment of Registered Agent

I hereby am familiar with and accept the duties and responsibilities as Registered Agent pursuant to Florida Statute §620.1114 for said limited partnership.

O'CONNOR LAW FIRM
Registered Agent

By:

Patrick M. O'Connor
Patrick M. O'Connor, Esquire, for the firm

FILED
2016 NOV - 9 P 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA