

A2000000291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

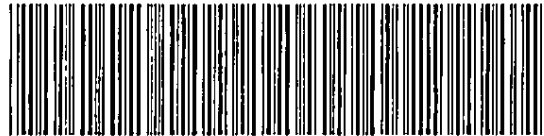
(Document Number)

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Special Instructions to Filing Officer:

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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2020 JUL 29 PM 4:40

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2020 JUL 29 PM 1:07

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US
8/3/20

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 07/28/2020

****WALK IN****

ENTITY NAME 58 LA GORCE CIRCLE LLLP

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

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2020 JUL 29 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$1000.00

ACCOUNT #: I20160000072

Please call Tina at the above number for any issues or concerns. Thank you so much!



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 30, 2020

SUNSHINE STATE CORPORATE COMPLIANCE COMPANY

SUBJECT: 58 LA GORCE CIRCLE, LLLP
Ref. Number: W20000082009

CORRECTED
Please Allow For
Same File Date

2020 JUL 31 PM 4:02

RECEIVED

We have received your document for 58 LA GORCE CIRCLE, LLLP and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Yvette Scott
Document Specialist II

Letter Number: 920A00014261

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

1. 58 La Gorce Circle, 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. 1800 Sunset Harbour Drive, Marina Suite P

(Street address of initial designated office)

Miami Beach, Florida 33139

3. Thomas G. Sherman, P.A.

(Name of Registered Agent for Service of Process)

4. 90 Almeria Avenue

(Florida street address for Registered Agent)

Coral Gables, Florida 33134

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. 1800 Sunset Harbour Drive, Marina Suite P

(Mailing address of initial designated office)

Miami Beach, Florida 33139

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:

58 La Gorce Circle GP, LLC

1800 Sunset Harbour Drive, Marina Suite P

Miami Beach, Florida 33139

2020 JUL 29 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

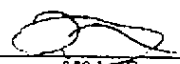
9. Effective date, if other than the date of filing: July 27, 2020

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 27th day of July, 2020

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.


Bari Reines, Manager of 58 La Gorce Circle GP, LLC,
the 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