

A 20000000319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

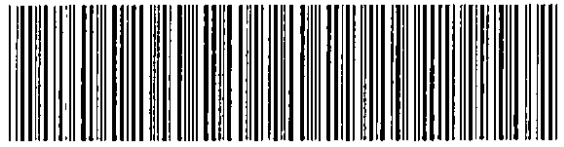
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

Office Use Only



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2020 AUG 19 PM 3:42  
TALLAHASSEE, FLORIDA

20/08  
J/S

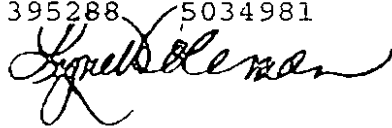
FILE 2ND

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 395288 5034981

AUTHORIZATION :



COST LIMIT : \$ 1000.00

ORDER DATE : August 19, 2020

ORDER TIME : 9:44 AM

ORDER NO. : 395288-010

CUSTOMER NO: 5034981

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2020 AUG 19 PM 3:42  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: BALBOA BULLDOGS LP

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson - EXT.

EXAMINER'S INITIALS: \_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Balboa Bulldogs LP  
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:

Barry S. Logan  
Contact Person  
Watsco, Inc  
Firm/Company  
2665 S Bayshore Drive, Suite 901  
Address  
Coconut Grove, FL 33133  
City, State and Zip Code  
blogan@watsco.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Barry S. Logan at ( 305 ) 714-4102  
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. Balboa Bulldogs LP

(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. 2665 S Bayshore Drive, Suite 901

(Street address of initial designated office)

Coconut Grove, FL 33133

3. Barry S. Logan

(Name of Registered Agent for Service of Process)

4. 2665 S Bayshore Drive Ste 901


(Florida street address for Registered Agent)

Coconut Grove, FL 33133

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TALLAHASSEE, FLORIDA  
CLERK OF CIRCUIT COURT

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.*

Barry S. Logan

By:  DocuSigned by  
Barry S. Logan  
Signature of Registered Agent  
02E7DE878006740

6. 2665 S Bayshore Drive, Suite 901

(Mailing address of initial designated office)

Coconut Grove, FL 33133

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:

Keys Serenity Management LLC

2665 S Bayshore Drive, Suite 901

Coconut Grove, FL 33133

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TALLAHASSEE FLORIDA

9. Effective date, if other than the date of filing: \_\_\_\_\_

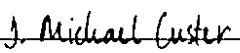
*(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)*

Signed this 18th day of August, 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.

Keys Serenity Management LLC

By its manager, J. Michael Custer

DocuSigned by:  
  
79E58E7515484D0

**Filing Fees:** \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)  
**Certified Copy (optional):** \$52.50  
**Certificate of Status (optional):** \$8.75