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SECRETARY OF STATE
RILLAHASSEE FLORIDA

M. THOMAS

JUL 2 1 2008

EXAMINER

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## **COVER LETTER**

**TO:** Registration Section Division of Corporations

# SUBJECT: MORBAY FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

(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:

Ann J. Zabielinski					
(Contact Person)	•				
JONATHAN H. GREEN & ASS	SOCIA	ΓES, Ι	P.A.		
(Firm/Company)		····	_		
799 Brickell Plaza, Suite 700					
(Address)			_		
Miami, Florida 33131					
(City, State and Zip Code)	ı		<del></del>		
For further information concerning this m Ann J. Zabielinski		ase call:	372-5100	SEGRET TALLAHA	טט טטב
(Name of Contact Person)	<del></del>		le and Daytime Telephor	oe Number)1−5	α
Enclosed is a check for the following amo  \$\sum_{\$1.000.00}\$ \text{ Filing Fees} and \$\text{ Certificate of Status}\$	ount: s 🔲 \$1.0.		ing Fees \$1,061.25	FLORIDE Filing Feet, Filing and	45 H
Fee)					
STREET ADDRESS:			ING ADDRESS:		
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building 2661 Executive Center Circle			Box 6327 assee, FL 32314		
2001 DACOULTO CONTOL CHOIC		ı anan	1033CC, FL JZJ14		

CR2E030 (01/06)

Tallahassee, FL 32301

CERTIFICATE OF LIMITED PARTNERSHIP

### MORBAY FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

THIS CERTIFICATE is duly executed and filed pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986), as amended (the "Act"), in order to form a limited partnership under the Act.

- (a) Name. The name of the subject limited partnership is the MORBAY FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP (the "Partnership").
- **Recordkeeping Office.** The address of the office at which the Partnership shall keep the records required to maintained under the Act is:

301 Costa Brava Court Coral Gables, Florida 33143

Registered Agent; Registered Office. The name and address of the agents for service of process on the Partnership required to be maintained under the Act are:

Jonathan H. Green & Associates, P.A. 799 Brickell Plaza, Suite 700 Miami, FL 33131

(c) General Partner. The names and business address of the General Partner(s) are:

ELISE MORALES and OSCAR MORALES

(d) Mailing Address. The mailing address of the Partnership is:

301 Costa Brava Court Coral Gables, Florida 33143

(e) <u>Term.</u> The latest date upon which the Partnership is to dissolve is December 31, 2055.

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(f) Election. If limited partnership elects to be a limited liability limited partnership, check box

IN WITNESS WHEREOF, the general partner has duly executed this

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Certificate, this 24 day of June	, 2008.
WITNESSES:  Print name: Algoboth Commelia	OSCAR MORALES, General Partner
Print name: Portrera Alecio	98 JUL 18 A
Print name: Eleateth Commetic	Cluse Morales, General Partner 5
Print name: Party work & C.O	