A1800000524

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone #)	<u> </u>
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

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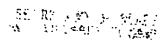
COVER LETTER

Division of Corporations		
SUBJECT: MANLEY DEBOER LUN	MBER COMPANY 2, LTD.	
	nership or Limited Liability Limited Partnership	
The enclosed Certificate of Limited Partners	ship and fees are submitted for filing.	
Please return all correspondence concerning	this matter to:	
IOUN O BOULTOU		
JOHN S. BOHATCH Contact Person		
GUTTENMACHER, BOHATCH & PENARANDA, P.A. Firm/Company		
·		
7301 SW 57TH CT, SUITE 560		
SOLITU MIAMI EL 22142		
SOUTH MIAMI, FL 33143 City, State and Zip Code		
eny, same and zay code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
JOHN S. BOHATCH	at (305) 666-1040	
Name of Contact Person	Area Code and Daytime Telephone Number	
Enclosed is a check for the following amount	nt:	
\$1,000.00 Filing Fees \$1,008.75 Filing Fees and \$35 Registered Agent Fee) \$1 to \$1,008.75 Filing Fees Status	\$1,052.50 Filing Fees and Certified Copy Certified Copy, and Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations P. O. Box 6327	
Clifton Building 2661 Executive Center Circle	Tallahassee, FL 32314	
Tallahassee, FL 32301	13	

CR2E030 (01/06)

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



1. MANLEY DEBOER LUMBER COMPANY 2, LTD.
(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. 1109 EATON STREET, KEY WEST, FL 33040
(Street address of initial designated office)
3. G,B, B-B REGISTRIES, LLC
(Name of Registered Agent for Service of Process)
4.7301 SW 57TH CT, SUITE 560
(Florida street address for Registered Agent)
SOUTH MIAMI, FL 33143
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
6.1109 EATON STREET, KEY WEST, FL 33040
(Mailing address of initial designated office)
7. If limited partnership elects to be a limited liability limited partnership, check box

Page 1 of 2

Page 2 of 2