

# A010000001683

Michael & Patricia Pontieri  
2039 Blue Springs Rd.  
West Palm Beach, FL 33411

City/State/Zip

Phone #

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) 000004730810-1  
-12/18/01--01055--001  
\*\*\*\*\*25.00 \*\*\*\*\*25.00
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

FILED  
01 DEC 18 PM 5:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- ☐ Walk in ☐ Pick up time ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

### NEW FILINGS

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

### OTHER FILINGS

- ☐ Annual Report  
☐ Fictitious Name

### AMENDMENTS

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

### REGISTRATION/QUALIFICATION

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

A01-1683  
QR

Examiner's Initials

**STATEMENT OF QUALIFICATION FOR FLORIDA OR FOREIGN  
LIMITED LIABILITY PARTNERSHIP**

1. The name of the partnership as identified in the records of the Florida Department of State:  
CEDAR SPRINGS INVESTMENT CLUB LLP

Insert partnership's Florida registration number: AB10000001683

or

Attach completed Partnership Registration Statement and \$50 filing fee.

2. Suffix adopted for the above named partnership: LLP

("Registered Limited Liability Partnership," "Limited Liability Partnership," "R.L.L.P.," "L.L.P.," "R.L.L.P." or "LLP")

3. The street address of its chief executive office: 2039 BLUE SPRINGS ROAD  
(if different from current recorded address): WEST PALM BEACH, FL 33411

4. The street address of principal office in Florida: \_\_\_\_\_  
(if different from above) \_\_\_\_\_

5. The name and Florida street address of the partnership's agent for service of process:

PATRICIA A. PONTIERI

2039 BLUE SPRINGS ROAD

WEST PALM BEACH, Florida 33411

6. This partnership hereby elects to be a limited liability partnership.

7. The effective date of this filing shall be:

X as of the date this document is filed with the Florida Secretary of State

or

\_\_\_\_\_ a date later than the time of filing: \_\_\_\_\_

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 11<sup>th</sup> day of December, 2001.

Signature of TWO Partners: \_\_\_\_\_

Typed or printed names of partners signing above: PATRICIA A. PONTIERI

MICHAEL J. PONTIERI

Filing Fee: \$25.00

Certified Copy: (Optional): \$52.50

Certificate of Status Optional): \$8.75