

JAN-10-06 06:46PM

FROM AKERMAN SENTERFITT EIDSON, P.A.

T-988 P-01/03 F-034

A06000000057

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000008279 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Diana Guerra
Account Name : AKERMAN, SENTERFITT & EIDSON, P.A. (FT. LAUDERDALE)
Account Number : I19980000010
Phone : (954) 463-2700
Fax Number : (954) 463-2224

FLORIDA/FOREIGN LP/LLP

EMERALD HYBRID I, LP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$1,052.50

RECEIVED
06 JAN 11 AM 8:06
DIVISION OF CORPORATION

2006 JAN 11 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

A06-57
al

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

1. The name of the limited partnership is: **EMERALD HYBRID I, 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.P.,
or LLLP.*

2. The street address of the initial designated office is:

1877 South Federal Highway – Suite 101
Boca Raton, Florida 33432

3. The name and address of the limited partnership's registered agent are:

American Information Services, Inc.
Las Olas Centre II, Suite 1600
350 E. Las Olas Boulevard
Fort Lauderdale, Florida 33301

4. *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.*

American Information Services, Inc.

By: 
Diana M. Guerra, Assistant Secretary

2006 JAN 11 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

5. The mailing address of the initial designated office is:

1877 South Federal Highway – Suite 101
Boca Raton, Florida 33432

6. If limited partnership elects to be a limited liability limited partnership, check box ☐

H06000008279

7. Name and business address of the general partner:

Name:	Address:
Allen Konrad Hybrid Management Corp.	1877 S. Federal Highway, Suite 101 Boca Raton, Florida 33432

Signed this 10th ^{pos. 156041} day of January, 2006.

ALLEN KONRAD HYBRID MANAGEMENT CORP.,
a Florida corporation

By: 
Name: Timothy L. Allen
Title: President

2006 JAN 11 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H06000008279