## 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.

(((H06000066881 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:

Account Name : LUSK, DRASTTES & TOLISANO, P.A.

Account Number : I20040000079 Fhone : (239)574-7442 Fax Number : (239)772-0318

## FLORIDA/FOREIGN LP/LLP

COMMERCE PARK PROJECT, LLLP

Certificate of Status	1
Ccrtified Copy	0
Page Count	#3
Estimated Charge	\$1,008.75

Electronic Filing Menu

Corporate Filing Menu

Help

SECHLIAN SIATE TALLAHASSITE FI ORINA

APPROVIDE TO THE PROPERTY OF T

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

## LCOMMERCE PARK PROJECT, LLLP (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 4634 PALM BEACH BLVD (Street address of initial designated office) FORT MYERS, FL 33905 3 TOM VENETIS (Name of Registered Agent for Service of Process) <sub>4.</sub> 4634 PALM BEACH BLVD (Florida street address for Registered Agent) FORT MYERS, FL 33905 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. <sub>6.</sub> 4634 PALM BEACH BLVD., FORT MYERS, FL 33905 (Mailing address of initial designated office)

Page 1 of 2

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

SECHEDICAL OF STATE

APPROVED

8. Name and business address of each general partner. Name: Business Address: VENPER II, LLC 4634 PALM BEACH BLVD. FORT MYERS FL 33905 Llaut26751 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.) day of FEBRUARY 2006 Signed this

Signature of each general partner

Tom Venetis

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

\$52.50

\$8.75

Page 2 of 2