

03/29/2006 14:39 FAX 407 4231-131

Division of Corporations

DEAN MEAD ORIGINAL

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Page 1 of 1

Florida Department of State

Division of Corporations
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TALLAHASSEE, FLORIDA

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To:

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

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407) 841-1200
Fax Number : (407) 423-1831

FLORIDA/FOREIGN LP/LLP

Leesburg Bay Limited Partnership

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$1,008.75

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2006 MAR 29 P 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Leesburg Bay 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:

Stephen R. Looney

(Contact Person)

Dean, Mead, Egerton, Bloodworth et al

(Firm/Company)

800 N Magnolia Avenue, Suite 1500

(Address)

Orlando, FL 32803

(City, State and Zip Code)

For further information concerning this matter, please call:

Stephen R. Looney

(Name of Contact Person)

at (407) 428-5128

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

<input type="checkbox"/> \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	<input checked="" type="checkbox"/> \$1,008.75 Filing Fees and Certificate of Status	<input type="checkbox"/> \$1,052.50 Filing Fees and Certified Copy	<input type="checkbox"/> \$1,061.25 Filing Fees, Certified Copy, and Certificate of Status
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STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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

2006 MAR 29 P 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Leesburg Bay Limited Partnership

(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. 3033 Mercy Drive, Suite A

(Street address of initial designated office)

Orlando, FL 32808

3. David R. Doeblor

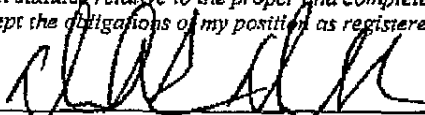
(Name of Registered Agent for Service of Process)

4. 3033 Mercy Drive, Suite A

(Florida street address for Registered Agent)

Orlando, FL 32808

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. 3033 Mercy Drive, Suite A

(Mailing address of initial designated office)

Orlando, FL 32808

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

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2006 MAR 29 P 12:00

8. Name and business address of each general partner:

Name:

Business Address:

Leesburg Bay, Inc.

3033 Mercy Drive, Suite A

Orlando, FL 32808

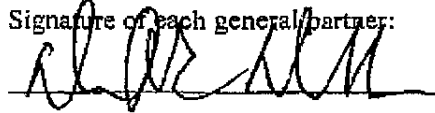
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.)

Signed this 27th day of March, 2006

Signature of each general partner:



President of Leesburg Bay, Inc.

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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