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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

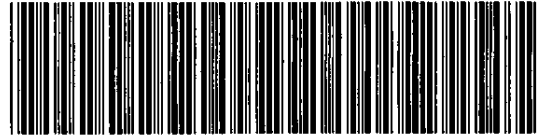
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. BRYAN JUN - 2 2006

5/25/02

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ZMH Investments, Ltd.
(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:

Kristina Juasz
(Contact Person)

Mitchell A. Sherman, P.A.
(Firm/Company)

7593 Baynton Bah Blvd. Ste. 210
(Address)

Baynton Bah FL 32437
(City, State and Zip Code)

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For further information concerning this matter, please call:

Kristina Juasz at (561) 738-1202
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
- \$1,008.75 Filing Fees and Certificate of Status
- \$1,052.50 Filing Fees and Certified Copy
- \$1,061.25 Filing Fees, Certified Copy, and Certificate of Status

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

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

1. ZMH Investments, 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. 1166 W. Newport Center Drive, #114

(Street address of initial designated office)

Deerfield Beach, FL 33442

3. James L. Young

(Name of Registered Agent for Service of Process)

4. 1166 W. Newport Center Drive, #114

(Florida street address for Registered Agent)

Deerfield Beach, FL 33442

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. 1166 W. Newport Center Drive, #114

(Mailing address of initial designated office)

Deerfield Beach, FL 33442

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

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8. Name and business address of each general partner:

Name:

Business Address:

James L. Young

1166 W. Newport Center Dr, #114

Deerfield Beach, FL 33442

Debra D. Young

1166 W. Newport Center Dr, #114

Deerfield Beach, FL 33442

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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 24th day of May, 2006

Signature of each general partner:

James L. Young
Debra D. Young

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75