

AD6000001256

BRAUNSTEIN AND TODISCO, P.C.
ATTORNEYS AT LAW
ONE ELIOT PLACE
FAIRFIELD, CONNECTICUT 06824-5154

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

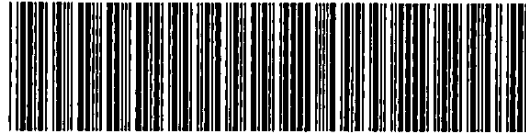
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800081247398

10/30/06--01041--025 **1000.00

FILED
06 OCT 30 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SAMUEL L. BRAUNSTEIN

ONE ELIOT PLACE
FAIRFIELD, CT 06824-5154

October 24, 2006

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

SUBJECT: **Jobeth Associates Limited Partnership**

Dear Sir/Madame:


We are enclosing herewith one (1) original *Certificate of Limited Partnership* for filing. You will also find enclosed herewith payment of the filing fees in the amount of \$1,000.00.

Please return all correspondence concerning this matter to the following:

Samuel L. Braunstein
Braunstein & Todisco, LLC
One Eliot Place
Fairfield, CT 06824-5154

For further information concerning this matter, please call: Samuel L. Braunstein at (203) 254-1118.

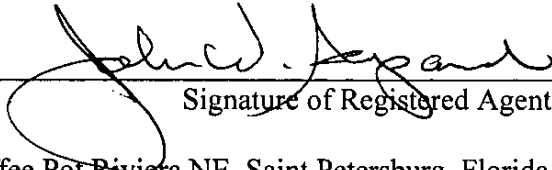
Sincerely,


Samuel L. Braunstein

Enclosures.

CERTIFICATE OF LIMITED PARTNERSHIP

1. Jobeth Limited Partnership
(Name of Limited Partnership, must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 440 Coffee Pot Riviera NE, Saint Petersburg, Florida 33704
(Street address of initial designated office)
3. John W. Sapanski
(Name of Registered Agent for Service of Process)
4. 440 Coffee Pot Riviera NE, Saint Petersburg, Florida 33704
(Florida street address for Registered Agent)
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. 440 Coffee Pot Riviera NE, Saint Petersburg, Florida 33704
(Mailing Address of initial designated office)
7. The latest date upon which the Limited Partnership is to be dissolved is: December 31, 2040

8. Name and business address of each general partner:
- | <u>Name</u> | <u>Street address:</u> |
|-------------|------------------------|
|-------------|------------------------|

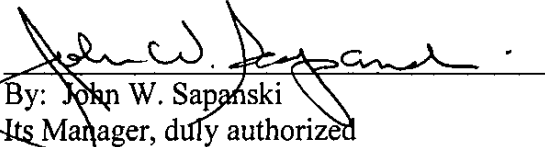
440 CPR Company, LLC *LO6-102870*

440 Coffee Pot Riviera NE
Saint Petersburg, FL 33704

Signed this 24th day of October, 2006.

Signature of all general partners:

440 CPR Company, LLC
General Partner


By: John W. Sapanski
Its Manager, duly authorized

FILED
06 OCT 30 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA