

To: 'FL Dept. of State'  
Subject: 001660 68430

From: Katie Wonsch

Friday, May 11, 2007 2:47 PM Page 1 of 4

# A07000020687

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

From:

Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

001660-68430

**FLORIDA/FOREIGN LP/LLP**

**LOREKANO FAMILY PARTNERSHIP, LTD.**

Certificate of Status	0
Certified Copy	1
Page Count	<del>3</del> 4
Estimated Charge	\$1,052.50

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**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
LOREKANO FAMILY PARTNERSHIP, LTD.**

The undersigned general partner desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Law as set forth in Chapter 620 of the Florida Statutes, does hereby state the following:

1. The name of the limited partnership formed hereby is:  
**LOREKANO FAMILY PARTNERSHIP, LTD.**
2. The address of the office of the Partnership is as follows:  
228 Seagull Lane  
Sarasota, FL 34236
3. The name and address of the registered agent of the Partnership for service of process is as follows:  
Carol A. Angelotti  
228 Seagull Lane  
Sarasota, FL 34236
4. The name and business address of the sole general partner of the Partnership is as follows:  
Carol A. Angelotti  
228 Seagull Lane  
Sarasota, FL 34236
5. The mailing address of the Partnership is as follows:  
228 Seagull Lane  
Sarasota, FL 34236
6. The latest date upon which the Partnership shall dissolve is December 31, 2050, unless the term of the Partnership is further extended by the Majority in Interest of the Partners as defined in this Agreement.

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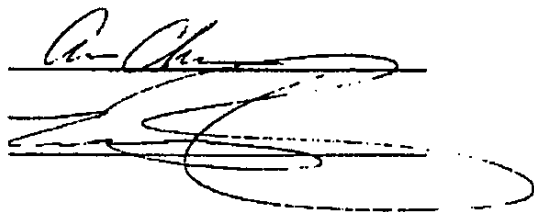
7. The effective date of this Certificate of Limited Partnership shall be the effective date of the filing of the certificate of limited partnership with Department of State.

The execution of this certificate by the undersigned general partners constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by CAROL A. ANGELOTTI, general partner of LOREKANO FAMILY PARTNERSHIP, LTD., a Florida Limited Partnership, this 10<sup>th</sup> day of May, 2007.

"General Partner"

WITNESSES AS TO  
CAROL A. ANGELOTTI:



  
CAROL A. ANGELOTTI

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**ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT**

Having been named to accept service of process for LOREKANO FAMILY PARTNERSHIP, LTD., at the place designated in the foregoing Certificate of Limited Partnership, I, CAROL A. ANGELOTTI, hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 620.192, Florida Statutes.

  
CAROL A. ANGELOTTI,  
Registered Agent

Date: May 10, 2007

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