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(Requestor's Name)

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(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

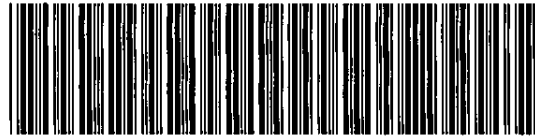
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
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OFT Ltd.

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TALLAHASSEE, FLORIDA

Signature

Requested by:

Name

Date

Time

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Art of Inc. File

LTD Partnership File

Foreign Corp. File

L.C. File

Fictitious Name File

Trade/Service Mark

Merger File

Art. of Amend. File

RA Resignation

Dissolution / Withdrawal

Annual Report / Reinstatement

Cert. Copy

Photo Copy

Certificate of Good Standing

Certificate of Status

Certificate of Fictitious Name

Corp Record Search

Officer Search

Fictitious Search

Fictitious Owner Search

Vehicle Search

Driving Record

UCC 1 or 3 File

UCC 11 Search

UCC 11 Retrieval

Courier

CERTIFICATE OF LIMITED PARTNERSHIP
OF
OFT LIMITED PARTNERSHIP

FILED
07 JUN 13 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, desire to form a limited partnership under the Florida Revised Uniform Limited Partnership Act as set forth in Florida Statute §620.1101 et. al., make the following certificate:

1. The name of the limited partnership shall be: OFT LIMITED PARTNERSHIP.
2. The Limited Partnership is created and formed for the purpose of engaging in all lawful business.
3. The street mailing address, location of the office and principal place of business for the limited partnership shall be 1670 RIDGETOP DRIVE, TARPON SPRINGS, FLORIDA 34688.
4. The name and business address of the general partner is OFTM, LLC, whose business address is 1670 RIDGETOP DRIVE, TARPON SPRINGS, FLORIDA 34688.
5. The partnership shall be perpetual. L070000 51437
6. The registered agent and its address for service of process as required by Florida Statute §620.1114 for the limited partnership shall be:

O'CONNOR & ASSOCIATES
1250 BELCHER ROAD, SUITE 160
LARGO, FL. 33771

The undersigned shall serve as a Registered Agent until otherwise removed or he shall resign pursuant to the laws of the State of Florida.

Under penalties of perjury we declare that we have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 12TH day of JUNE, 2007.

WITNESSES:

General Partner

OFTM, LLC, a Florida limited liability
corporation as general partner

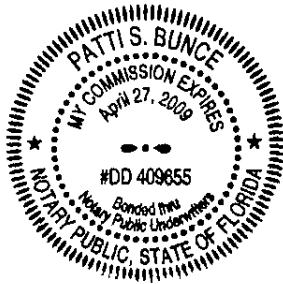
Christina We
Patricia Buck

By:

Pat O Buck
PATRICIA BUCK, its Manager

STATE OF FLORIDA)
COUNTY OF PINELLAS) S.S.

The foregoing instrument was acknowledged before me this 12TH day of JUNE, 2007, by PATRICIA BUCK as Manager of OFTM, LLC, as general partner, on behalf of the OFT LIMITED PARTNERSHIP, a Florida Limited Partnership. She is personally known to me or has produced Fla. Div. LLC as identification and did take an oath.



Patti S. Bunce
Notary Public
State of Florida
My Commission Expires:

Acknowledgment of Registered Agent

I hereby am familiar with and accept the duties and responsibilities as Registered Agent pursuant to Florida Statute §620.1114 for said limited partnership.

By: _____

Patrick M. O'Connor
Registered Agent