

AU7000001009

(Requestor's Name)

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(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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07 SEP -7 PM 2:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Sonotek Research

Requester's Name

Address

City/State/Zip

Phone #

656-5454

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Haver Investments LLC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)



☐ Pick up time  
☐ Will wait

☐ Photocopy



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**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☒ Foreign
- ☒ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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

1. (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.*

HAVER INVESTMENTS, LLLP

2. (Street address of initial designated office)

16520 Senterra Drive, Delray Beach, FL 33484

3. (Name of Registered Agent for Service of Process)

David Haver

4. (Florida street address for Registered Agent)

16520 Senterra Drive, Delray Beach, FL 33484

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. (Mailing address of initial designated office)

16520 Senterra Drive, Delray Beach, FL 33484

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

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TALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

Haver Holdings, LLC

16520 Senterra Drive

L07000574709

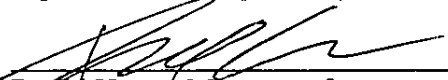
Delray Beach, FL 33484

9. Effective date, if other than the date of filing: N/A

*(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 19<sup>th</sup> day of July, 2007.

Signature of each general partner:

  
\_\_\_\_\_  
David Haver, Manager of  
Haver Holdings, LLC, General Partner

**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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