

A07000001026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

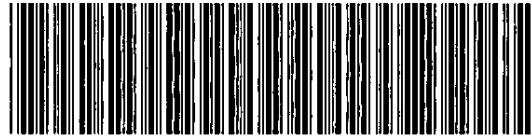
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 AUG 29 PM 1:14

Steve GAVE
AUTHORIZATION BY PHONE TO
CORRECT Name
DATE 8/30
DOC. EXAM 18M

STEVEN A. SCIARRETTA, P.A.

ATTORNEYS AT LAW

STEVEN A. SCIARRETTA
LL.M. IN TAXATION

THE HAMILTON BUILDING
2799 NW Boca Raton Blvd., Suite 203
Boca Raton, Florida 33431
TELEPHONE: (561) 368-7978
TOLL FREE: (800) 545-8454
TELEFAX: (561) 368-8502

Asset Protection
Business and Taxation Planning
Probate Administration
Trusts and Estate Planning

VIA NEXT DAY DHL

May 29, 2007

State of Florida
Department of State
Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Re: REDNER 1997 PARTNERS LLLP

Dear Sir/Madam:

Please find enclosed for filing two (2) original Certificates for the above LLLP.

Also enclosed is our check for \$1,122.50, made payable to the Florida Department of State, which represents the appropriate filing fee for this entity.

Please return the completed paperwork to me at the address noted above. A self-addressed, pre-paid DHL envelope is enclosed for your convenience.

Thank you for your prompt cooperation.

Sincerely,

STEVEN A. SCIARRETTA, P.A.

Steven A. Sciarretta

SAS/dc
Enclosures

**CERTIFICATE OF LIMITED LIABILITY LIMITED PARTNERSHIP
OF
REDNER 1997 PARTNERS LLLP**

1. REDNER PARTNERS LLLP

(name of Limited Liability Limited Partnership must contain a suffix such as "Limited Liability Limited Partnership", "L.L.L.P." or "LLLP")

2. 2799 NW Boca Raton Blvd., Suite 203, Boca Raton, FL 33431

(The business address of the Limited Partnership)

3. Steven A. Sciarretta, Esquire

(Name of Registered Agent for Service of Process)

4. 2799 NW Boca Raton Blvd., Suite 203, Boca Raton, FL 33431

(Florida street address of 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.

(Registered Agent must sign here to accept designation as Registered Agent)

6. Set forth on Line #2

(The mailing address of the Limited Partnership)

7. This Limited Partnership elects to be a Limited Liability Limited Partnership.

8. NAME OF GENERAL PARTNER

SPECIFIC ADDRESS

REDNER MANAGEMENT LLC

2799 NW Boca Raton Blvd.
Suite 203
Boca Raton, FL 33431

9. The effective date of this limited liability limited partnership shall be the date of filing.

Signed this 28th day of August, 2007
Signature of General Partner:

Steven A. Sciarretta
On behalf of Redner Management, LLC

FULL SECRETARY
DIVISION OF CORPORATIONS
07 AUG 29 PM 1:14