Division of Corporations Public Access System

## **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000240165 3)))



H070002404653ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : ROETZEL & ANDRESS

Account Number : I2000000121

Phone : (239)649-6200

Fax Number : (239)261-3659

116438,3

## FLORIDA/FOREIGN LP/LLP

Altamonte Hospitality, LP

 Certificate of Status
 1

 Certified Copy
 1

 Page Count
 03

 Estimated Charge
 \$1,061.25

Electronic Filing Menu

Corporate Filing Menu

Help

H07000240165 3

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

ALIAMONIE ROSFIIALITI, LE		
(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.		in ti
2. 1407 UNION AVENUE, SUITE 400, MEMPHIS, TN 38104 (Street address of initial designated office)		• •
(Sheet address of initial designated office)	•	
3 R&A AGENTS, INC.		
(Name of Registered Agent for Service of Process)		
4.2320 FIRST STREET - SUITE 1000		
(Florida street address for Registered Agent)	•	•
FORT MYERS, FL 33901-2904		٠:
S. 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 an accept the obligations of my position as registered agent.  R&A AGENTS, INC.  By:  Signature of Registered Agent	SECRETARY FALLAHASSE	
6. 1407 UNION AVENUE, SUITE 400. MEMPHIS, TN 38104 (Mailing address of initial designated office)	PH 4: 1. OF STATE F. FLORIDA	回
·	Ci	

Page 1 of 2

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

## H07000240165 3

Name:	Business Address:		
ASH-C, INC.	1407 UNION AVENUE, SUITE 400		
	MEMPHIS, TN 38104		
			,
•			
	CONTRACTOR OF THE CONTRACTOR O		
		·	
	· · · · · · · · · · · · · · · · · · ·		
<del></del>		07 FAL	
9. Effective date, if other than the date of filing:  (Effective date cannot be prior to nor more to filed by the Florida Department of State.)		OCT - 1 PM 4: 1 ECRE (ARY OF STATE LLAHASSEE: FLORID	
Signed this 27 day of	SEPTEMBER , 2007	STATE ORIDI	
Signature of each general partner:	·	AFF 5	
ASH-C, INC.			
PACE COOPER, PRESIDENT			
Filing Fees: \$1,000. Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	.00 (\$965 Filing Fee and \$35 Registered Agent Fee)		

\$8.75 Page 2 of 2