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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**L. SELLERS**

JUN 24 2008

**EXAMINER**

Office Use Only



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06/23/08--01016--015 \*\*1052.50

**FILED**  
2008 JUN 23 PM 2:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HBH HOLDING LTD.  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

JACK R. LOVING  
(Contact Person)

JACK R. LOVING, P.A.  
(Firm/Company)

1323 SE THIRD AVENUE  
(Address)

FORT LAUDERDALE, FL 33316  
(City, State and Zip Code)

For further information concerning this matter, please call:

JACK R. LOVING at ( 954 ) 764-1005  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)  
☐ \$1,008.75 Filing Fees and Certificate of Status  
☒ \$1,052.50 Filing Fees and Certified Copy  
☐ \$1,061.25 Filing Fees, Certified Copy, and Certificate of Status

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

CR2E030 (01/06)

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

1.                     HBJ Holding, Ltd                    

(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.*

2.                     21715 Cartagena Drive                      
(Street address of initial designated office)

                    Boca Raton, FL 33428                    

3.                     Charles Woodruff Hendrix, III                      
(Name of Registered Agent for Service of Process)

4.                     21715 Cartagena Drive                      
(Florida street address for Registered Agent)

                    Boca Raton, FL 33428                    

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.                     21715 Cartagena Drive                      
(Mailing address of initial designated office)

                    Boca Raton, FL 33428                    

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

8. Name and business address of each general partner:

Name:

Business Address:

HBJ Land, LLC

21715 Cartagena Drive

Boca Raton, FL 33428

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9. Effective date, if other than the date of filing: \_\_\_\_\_.

*(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 13<sup>th</sup> day of June, 2008.

Signature of each general partner:

Charles W. Hendrix

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**Filing Fees:**

**Certified Copy (optional):**

**Certificate of Status (optional):**

**\$1,000.00** (\$965 Filing Fee and \$35 Registered Agent Fee)

**\$52.50**

**\$8.75**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED