

AU800000630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

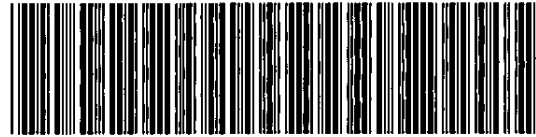
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/25/08--01008--006 **1061.25

RECEIVED
08 JUN 25 AM 10:20
STATE
OFFICE OF
TALLAHASSEE, FLORIDA

FILED
08 JUN 25 PM 5:00
STATE
OFFICE OF
TALLAHASSEE, FLORIDA

B. KOHR

JUN 26 2008

EXAMINER

Sunotak Research
Requester's Name

Address

City/State/Zip 6565454
Phone #

Office Use Only

FILED
08 JUN 25 PM 5:00
TALLAHASSEE, FLORIDA

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

1. VEL Limited Partnership
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)
- file 2nd*

- ☒ Walk in ☐ Pick up time ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certificate of Status

NEW FILINGS

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

AMENDMENTS

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

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

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

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP

FOR

UEL LIMITED PARTNERSHIP

FILED
08 JUN 25 PM 5:00
CLERK OF STATE
TALLAHASSEE, FLORIDA

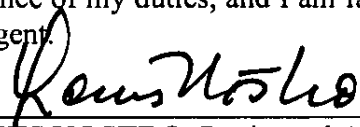
1. **Name.** The name of the limited partnership is **UEL LIMITED PARTNERSHIP.**

2. **Address.** The street address and mailing address of the initial designated office of the limited partnership is 17058 Whitehaven Drive, Boca Raton, Florida 33496.

3. **Registered Agent.** The name of the registered agent for service of process is Louis Nostro.

4. **Address of Registered Agent.** The street address for the registered agent is 201 South Biscayne Boulevard, Suite 1600, Miami, Florida 33131.

5. **Registered Agent Acceptance.** 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.


LOUIS NOSTRO, Registered Agent

6. **Name and Business Address of General Partner.** The name of the general partner is **UEL MANAGEMENT CORPORATION**, and the business address of the general partner is 17058 Whitehaven Drive, Boca Raton, Florida 33496.

Signed this 17 day of June, 2008.


MONTE P. NATHANSON, President of UEL
MANAGEMENT CORPORATION, General
Partner