

To:   
Subject

From: Patricia Tadlock

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**A0800000713**  
Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383  
From: Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

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DIVISION OF CORPORATIONS  
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0204.90200

**FLORIDA/FOREIGN LP/LLLP**

**GULF STANDARD ENERGY PARTNERS, LP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$1,052.50

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**J. BRYAN**

AUG -1 2008

**EXAMINER**

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

1. GULF STANDARD ENERGY PARTNERS, LP

(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 L.L.P.

2. 1414 W. SWANN AVE., STE. 100

(Street address of initial designated office)

TAMPA, FL 33606

3. THOMAS P. MCNAMARA

(Name of Registered Agent for Service of Process)

4. 2907 BAY TO BAY BLVD., STE. 201

(Florida street address for Registered Agent)

TAMPA, FL 33629

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. 1414 W. SWANN AVE., STE. 100

(Mailing address of initial designated office)

TAMPA, FL 33606

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

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8. Name and business address of each general partner:

Name:	Business Address:
<u>GSEP GP, LLC</u>	<u>1414 W. SWANN AVE., STE. 100</u>
<u>#L08000073119</u>	<u>TAMPA, FL 33606</u>
_____	_____
_____	_____
_____	_____
_____	_____
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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 31 day of JULY 2008

Signature of each general partner:

GSEP GP, LLC

By:

W. Andrew Krizen, Jr., Manager

Filing Fees:

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

Certified Copy (optional):

\$32.50

Certificate of Status (optional):

\$8.75

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