

A080000000769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

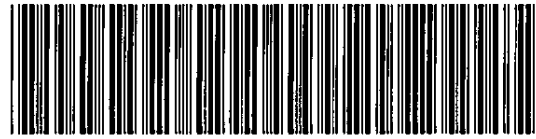
(Document Number)

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

Special Instructions to Filing Officer:

W08-39780

Office Use Only



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08/26/08--01003--007 \*\*1061.25

08 AUG 26 PM 1:05  
SECURITY UNIT OF STATE  
TALLAHASSEE, FLORIDA

FILED

08 AUG 26 AM 10:39  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

RECEIVED

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TALLAHASSEE, FLORIDA

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B. KOHR

AUG 28 2008

EXAMINER

Sonstate Research  
Requester's Name

Address

City/State/Zip

Phone #

656-5454

Office Use Only

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

1. De Zarraga Family Limited  
(Corporation Name) (Document #)
2. Partnership  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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08 AUG 26 PM 1:05  
TALLAHASSEE, FLORIDA

filed and

- Walk in
- Mail out
- Pick up time
- Will wait
- Photocopy
- Certified Copy
- 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 26, 2008

SUNSTATE RESEARCH

SUBJECT: DE ZARRAGE FAMILY LIMITED PARTNERSHIP  
Ref. Number: W08000039780

*Rooub -  
Please have  
dated 08/26/08  
Thanks!*

We have received your document for DE ZARRAGE FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 508A00047507

08 AUG 26 PM 1:05  
FILED  
TALLAHASSEE FLORIDA  
DIVISION OF STATE

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

FILED  
08 AUG 26 PM 1:05  
TALLAHASSEE, FLORIDA

1. DE ZARRAGA FAMILY LIMITED PARTNERSHIP

(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.  
or LLLP.*

2. 8520 S.W. 53rd Avenue, Miami, Florida 33143

(Street address of initial designated office)

3. Anthony T. Golden

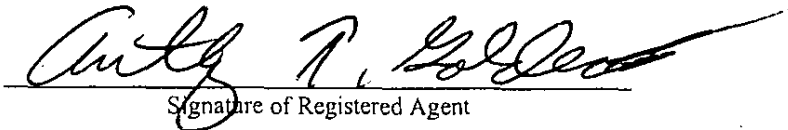
(Name of Registered Agent for Service of Process)

4. c/o Shutts & Bowen LLP, 201 South Biscayne Boulevard, Suite 1600

(Florida street address for Registered Agent)

Miami, Florida 33131

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. 8520 S.W. 53rd Avenue, Miami, Florida 33143

(Mailing address of initial designated office)

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:

DE ZARRAGA FAMILY MANAGEMENT COMPANY, LLC

8520 S.W. 53rd Avenue

L08000081294

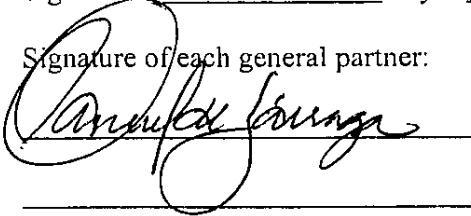
Miami, Florida 33143

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 15 day of August, 2008.

Signature of each general partner:



**Filing Fees:**

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

**Certified Copy (optional):**

**\$52.50**

**Certificate of Status (optional):**

**\$8.75**