

Nov. 26, 2008 1:48PM

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : ARNOLD MATHENY & BAKAN, P.A.  
Account Number : I200000000141  
Phone : (407) 841-1550  
Fax Number : (407) 420-1829

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## FLORIDA/FOREIGN LP/LLLP

### Wall Street Opportunity Fund, LLLP

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$1,061.25

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Wall Street Opportunity Fund, LLLP  
(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:

Arthur R. Louv

(Contact Person)

Arnold, Matheny & Eagan PA

(Firm/Company)

605 East Robinson Street

(Address)

Orlando FL 32801

(City, State and Zip Code)

For further information concerning this matter, please call:

Arthur R. Louv

(Name of Contact Person)

at ( 407 ) 841 1550

(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

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

1. Wall Street Opportunity Fund, LLLP

(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. 1025 Greenwood Blvd., Suite 351, Lake Mary, Florida 32746

(Street address of initial designated office)

3. AM&E Services LLC

(Name of Registered Agent for Service of Process)

4. 605 East Robinson Street, Suite 730 Orlando, Florida 32801

(Florida street address for Registered Agent)

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. 1025 Greenwood Blvd., Suite 351, Lake Mary, Florida 32746

(Mailing address of initial designated office)

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:

Wall Street Advisors, Inc.

1025 Greenwood Blvd., Suite 351, Lake Mary, Florida 32746

908-102766

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TALLAHASSEE, FLORIDA

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9. Effective date, if other than the date of filing: 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 26<sup>th</sup> day of November 2008

Signature of each general partner:

Jim Schmal, PRESIDENT

WALL STREET ADVISORS, INC.

**Filing Fees:**

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

**Certified Copy (optional):**

**\$52.50**

**Certificate of Status (optional):**

**\$8.75**

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