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## Division of Co $\infty 1011$ Florida Department of State

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## FLORIDA/FOREIGN LP/LLLP

## Aleade Rile Second CANTOR SPELLMAN FAMILY LIMITED PARTNERSHIP, LLLP

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December 9, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BARNETT, BOLT

SUBJECT: CANTOR SPELLMAN FAMILY LIMITED PARTNERSHIP, LLLP

REF: W08000054512

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheets

The name of your limited liability limited partnership cannot include a limited partnership suffix. The name must include an acceptable limited liability limited partnership suffix. Acceptable limited liability limited partnership suffixes include: Limited Liability Limited Partnership, L.L.L.P. or LLLP. Please amend your document accordingly.

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) 245-6067.

Neysa Culligan Document Specialist FAX Aud. #: H08000269607 Letter Number: 308A00059645 Н08000269607 3

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SECRETARY OF STATE TALLAHASSEE FLORIDA

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

LCANTOR SPELLMAN FAMILY PARTNERSHIP, 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. 132 W. Davis Boulevard
(Street address of initial designated office)
Tampa, Florida 33606
3. Leslie J. Barnett
(Name of Registered Agent for Service of Process)
4, 601 Bayshore Boulevard, Suite 700
(Florida street address for Registered Agent)
Tampa, Florida 33606
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 an accept the obligations of my position as registered agent.  Signature of Registered Agent
<sub>6,</sub> 132 W. Davis B <del>oulé</del> vard
(Mailing address of initial designated office)
Tampa, Florida 33606
7. If limited partnership elects to be a limited liability limited partnership, check box

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H08000269607 3

8. Name and business address of each Name:	general partner: <u>Business Address:</u>
Cantor Spollman Management Company, LLC	132 W. Davis Boulevard
LD8-111959	Tampa, Florida 33606
	<del></del>
9. Effective date, if other than the date of filing	3:
(Effective date cannot be prior to nor m filed by the Florida Department of State	nore than 90 days after the date the document is e.)
Signed this 26th day of N	November 2008
Signature of each general partner: Cantor Spellman Management Company, LLC	OB DEC -
By: Joel A. Cantor, Member	STATE OF THE STATE
Filing Fees: \$1 Certified Copy (optional): \$5	,000.00 (\$965 Filling Fee and \$35 Registered Agent Fee)
	32.50 3.75

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