

**A09000000199**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : BARNETT, BOLT, KIRKWOOD, LONG & MCBRIDE  
Account Number : 072731001155  
Phone : (813)253-2020  
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**FLORIDA/FOREIGN LP/LLP**

**Kreisler Family Partnership, LLLP**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$1,008.75

\* 2 of 2  
Please file second

J. BRYAN

Electronic Filing Menu

Corporate Filing Menu

MAR 26 2009

EXAMINER

H09000071746 3

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

**FILED**  
09 MAR 29 AM 8:57  
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1. Kreiser 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. 9932 U.S. Highway 19

(Street address of initial designated office)

Port Richey, FL 34668

3. Michael D. Miller

(Name of Registered Agent for Service of Process)

4. 601 Bayshore Boulevard, Ste. 700

(Florida street address for Registered Agent)

Tampa, FL 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 and accept the obligations of my position as registered agent.



Signature of Registered Agent

6. 9932 U.S. Highway 19

(Mailing address of initial designated office)

Port Richey, FL 34668

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:

Kreislser Management Company, LLC

9932 U.S. Highway 19

#L090000291605

Port Richey, FL 34668

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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 26<sup>th</sup> day of March, 2009

Signature of each general partner:

KREISLER MANAGEMENT COMPANY, LLC

By: *Leon Kreisler*

Leon Kreisler, Member

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)  
Certified Copy (optional): \$52.50  
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