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COVER LETTER

TO: Registration Section **Division of Corporations** CERVERA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP 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: Ann J. Zabielinski Contact Person JONATHAN H. GREEN & ASSOCIATES, P.A. Firm/Company 799 Brickell Plaza, Suite 700 Address Miami, Florida 33131 City, State and Zip Code ajz@JHGLAW.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ann J. Zabielinski) 372-5100 Name of Contact Person Area Code and Daytime Telephone Number Enclosed is a check for the following amount: **✓** \$1,000.00 Filing Fees \$1,008.75 Filing Fees \$1,052.50 Filing Fees \$1,061.25 Filing Fees, Certified Copy, and (\$965 Filing Fee and and Certificate of and Certified Copy Certificate of Status \$35 Registered Agent Status Fee) **MAILING ADDRESS:** STREET ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

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CERTIFICATE OF LIMITED PARTNERSHIP 09 JUN -8 PM 3: 23

OF THE

SECRETARY OF STATE TALLAHASSEE FLORIDA

CERVERA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

THIS CERTIFICATE is duly executed and filed pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986), as amended (the "Act"), in order to form a limited partnership under the Act.

- (a) Name. The name of the subject limited partnership is the CERVERA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP (the "Partnership").
- **Recordkeeping Office.** The address of the office at which the Partnership shall keep the records required to maintained under the Act is:

1492 South Miami Avenue Miami, Florida 33103

<u>Registered Agent</u>; <u>Registered Office</u>. The name and address of the agent for service of process on the Partnership required to be maintained under the Act are:

Jonathan H. Green & Associates, P.A. 799 Brickell Plaza, Suite 700 Miami, FL 33131

(c) General Partner. The names and business address of the General Partner(s) are:

JAVIER CERVERA, SR., Trustee ALICIA CERVERA, SR., Trustee

(d) <u>Mailing Address</u>. The mailing address of the Partnership is:

1492 South Miami Avenue Miami, Florida 33103

(e) <u>Term.</u> The latest date upon which the Partnership is to dissolve is December 31, 2055.

(f) Election. If limited partnership elects to be a limited liability limited partnership, check box \square .

IN WITNESS WHEREOF, the general partner has duly executed this

Certificate, this	C4r	day of Acc	, 2009
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WITNESSES:

Print name: Roule Toly

JAVIER CERVERA, SR., trustee of the Javier Cervera, Sr. Revocable Living Trust, General Partner

AZICIA CERVERA, SR., trustee of the Alicia Cervera, Sr. Revocable Living Trust,

Print name: Jonathan H-Gleen

Print name: Rull John

without H. Green

General Partner

Print name:

CONSENT TO SERVE AS REGISTERED AGENT

FOR THE

CERVERA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

Having been appointed to serve in the State of Florida as the registered agent of, and to accept service of process for, the CERVERA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP, the undersigned hereby accepts said appointment and agrees to serve as said registered agent. The undersigned further agrees to comply with the provisions of all Florida statutes relative to the proper and complete performance of the undersigned's duties, and hereby acknowledges that the undersigned is familiar with and accepts the obligation of the undersigned's position as said registered agent.

Dated: 12009.

JONATHAN H. GREEN & ASSOCIATES, P.A.

a Florida Corporation

JONATHAN H. GREEN

09 JUN -8 PH 3: 23
SECRETARY OF STATE