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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

JUN 1 1 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: JOSHUA P. SCHRAGER 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:

Rachel L. Tolley		
Contact Person		
JONATHAN H. GREEN & ASSOCI	ATES, 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 ma	at (305) 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,		
(\$965 Filing Fee and and Certificate of	and Certified Copy Certified Copy, and	
\$35 Registered Agent Status Fee)	Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

P. O. Box 6327 Tallahassee, FL 32314

CR2E030 (01/06)

CERTIFICATE OF LIMITED PARTNERSHIP

OF THE

JOSHUA P. SCHRAGER 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 JOSHUA P. SCHRAGER 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:

2501 Davie Road, Suite 230 Ft. Lauderdale, FL 33317

Registered Agent: Registered Office. 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) <u>General Partner</u>. The names and business address of the General Partner(s) are:

Joshua P. Schrager, Trustee

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

2501 Davie Road, Suite 230 Ft. Lauderdale, FL 33317

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

DIVISION OF CORPORATIONS

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

IN WITNESS WHEREOF, the general partner has duly executed this

Certificate, this 4 day of JUNE, 2009.

WITNESSES:

Print name: Miriam Ta

CVRAGER, Trustee, his successor(s) as trustee(s) of the Amended and Restated Joshua Schrager Revocable Living Trust, General Partner

Jonathan H. Green

CONSENT TO SERVE AS REGISTERED AGENT

FOR THE

JOSHUA P. SCHRAGER 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 JOSHUA P. SCHRAGER 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: JUNE 4 , 2009.

JONATHAN H. GREEN & ASSOCIATES, P.A.

a Florida Corporation

JONNTHAN H. GREEN

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SECRETARY OF STATE
DIVISION OF CORPORATIONS