

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED

AND  
FILED

12 AUG -7 AM 10:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED  
PARTNERSHIP  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # A09000000481

1. Name of Limited Partnership

Alsandro Partnership, LLLP

2. Principal Office Address - No P.O. Box #  
2345 Alaqua Drive

3. Mailing Office Address  
2345 Alaqua Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Longwood, FL

City & State  
Longwood, FL

Zip  
32779

Country  
United States

Zip  
32779

Country  
United States

4. Date Formed or Registered  
To Do Business in Florida 07/09/2009

5. FEI Number 27-0801780

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required  
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name  
Cross, Fernandez & Riley, LLLP

Street Address (P.O. Box Number is Not Acceptable)  
201 S. Orange Avenue

Suite, Apt. #, Etc.  
Suite 800

City  
Orlando

FL Zip Code 32801

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited  
partnership revoked on our records.

E-mail Address:

JSpooner@cfr CPA.com

E-Mail address to be used for future annual report notices

9. Pursuant to the provisions of section 620.1810 or 620.1809, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620,  
Florida Statutes

SIGNATURE (Registered Agent Accepting Appointment)

*J. Spooner*  
(REGISTERED AGENT MUST SIGN)

DATE

5/25/12

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10. Name(s) of General Partner(s)

Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

City, State and Zip Code

10a. Registration  
Document Number

Alsandro GP, LLC

2345 Alaqua Drive

Longwood, FL 32779

L09000065338

REINSTATEMENT

10-12

DBRUC

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any  
liability of non-compliance with Chapter 119, FS, in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate  
and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by  
chapter 620, Florida Statutes. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, FS.

SIGNATURE

*Ronald*

DATE

8/3/12

Typed or Printed Name of General Partner Signing Form

Telephone Number