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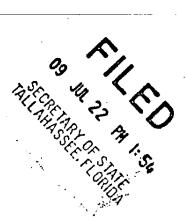
SECRETARY OF STATE
TALLAHASSEE, FIRBLE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: ORLEANS GROUP 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:		
	Greta P. Lozada	· · ·		
Contact Person				
JONATHAN H. GREEN & ASSOCIATES, P.A.				
Firm/Company				
799 Brickell Plaza, Suite 700				
Address				
Miami, Florida 33131				
City, State and Zip Code				
gpl@jhglaw.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
	Greta P. Lozada	at (305) 372-5100		
Name	of Contact Person	Area Code and Daytime Telephor	ne Number	
Enclosed is a check for the following amount:				
\$1,000.00 Filing Fees \$\int \\$1,008.75 Filing Fees \\$1,052.50 Filing Fees \\$1,061.25 Filing Fees, \\$25 Registered Agent Fee) \$\int \\$1,008.75 Filing Fees \\$1,052.50 Filing Fees \\$1,061.25 Filing Fees, \\$25 Registered Agent \\$35 Registered Agent \				
STREET AI	DDRESS:	MAILING ADDRESS		
Registration S		Registration Section		
Division of Corporations		Division of Corporations		
Clifton Building 2661 Executive Center Circle		P. O. Box 6327 Tallahassee, FL 32314		
Tallahassee, l		rananassee, FL 32314		

CR2E030 (01/06)





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 ORLEANS GROUP LIMITED PARTNERSHIP (the "Partnership").
- (b) Recordkeeping Office. The address of the office at which the Partnership shall keep the records required to maintained under the Act is:

1850 S. Ocean Blvd, #701 Lauderdale by the Sea, FL 33062

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

Gregory O'loughlin

(d) Mailing Address. The mailing address of the Partnership is:

1850 S. Ocean Blvd, #701 Lauderdale by the Sea, FL 33062

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

(f) <u>Election</u>. 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 16 day of 34, 2009.

WITNESSES:

Print name: Forete Lozada

GREGORY O'LOUGHLIN, General Partner

Print name: Post Toly



CONSENT TO SERVE AS REGISTERED AGENT

FOR THE ORLEANS GROUP

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 ORLEANS GROUP 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: <u>5014</u> 16 , 2009.

JONATHAN H. GREEN & ASSOCIATES, P.A.

a Florida Corporation

ONATHAN H. GREEN

SECRETARY OF STATE