

# **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090001840673)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEF & SIT

Account Number : I20060000135 Phone

: (305)789-3200

Fax Number

: (305)789-3395

# FLORIDA/FOREIGN LP/LLLP

# LAUREL POINTE APARTMENTS, LP

| Certificate of Status | 0          |
|-----------------------|------------|
| Certified Copy        | 1          |
| Page Count            | 02         |
| Estimated Charge      | \$1,052.50 |

D. BRUCE

AUG 19 2009

**EXAMINER** 

Filing Menu

Corporate Filing Menu

Help

1

H09000184067

### CERTIFICATE OF LIMITED PARTNERSHIP

#### OF

### LAUREL POINTE APARTMENTS, LP

Pursuant to the Florida Revised Uniform Limited Partnership Act of 2005, the undersigned, being the sole General Partner of LAUREL POINTE APARTMENTS, LP, a Florida limited partnership (the "Partnership"), hereby executes and submits for filing with the Florida Department of State this Certificate of Limited Partnership, to read as follows:

1. The name of the Limited Partnership is:

## LAUREL POINTE APARTMENTS, LP

2. The mailing address and street address of the Partnership currently is:

4300 Marsh Landing Blvd., #101 Jacksonville Beach, FL 32250

3. The name and address of the agent for service of process on the

Partnership are:

Alexander B. Cvercko 12170 Cedar Trace Dr. S Jacksonville, FL 32246

3. The name and address of the General Partner of the Partnership are:

Laurel Pointe Apartments GP, LLC 4300 Marsh Landing Blvd., #101 Jacksonville Beach, FL 32250 L09000079852

IN WITNESS WHEREOF, the undersigned has signed this Certificate of Limited Partnership as General Partner, pursuant to the provisions of Section 620.1204 of the Florida Revised Uniform Limited Partnership Act of 2005.

DATED: August 17, 2009

Laurel Pointe Apartments GP, LLC

Name: \_\_\_\_

langaina Membe

H09000184067

£ ....

H09000184067

# ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT

I, Alexander B. Cvercko, hereby accept the appointment as registered agent for LAUREL POINTE APARTMENTS, LP, a Florida limited partnership. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and am familiar with and accept the obligations of the position of registered agent.

DATED: August 17, 2009

Alexander B. Cvercko

I:\W-CO\37233\Laural Point\Cert of LP.doc

O9 AUG 18 AM 10: 55
SECRETARY OF STATE