

H0900001835973

Florida Department of State
Division of Corporations
Public Access System

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.

((H09000183597 3)))



H090001835973ABC9

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 : DAVID FONG
Account Number : I20020000037
Phone : (407)706-1378
Fax Number : (407)706-1379

2009 AUG 19 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

FLORIDA/FOREIGN LP/LLLP

Mega GNG, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$1,000.00

RECEIVED

09 AUG 19 PM 12:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

M. THOMAS
Help

AUG 20 2009

(H09000183597 3)

CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP

1. Mega GNG, LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or L.L.P.

2. 105 E. State Road 434, Winter Springs, FL 32708
(Street address of initial designated office)

3. David Fong
(Name of Registered Agent for Service of Process)

4. 105 E. State Road 434, Winter Springs, FL 32708
(Florida street address for Registered Agent)

5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to
comply with the provisions of all statutes relative to the proper and complete performance of my duties
and I am familiar with and accept the obligations of my position as registered agent.

David Fong
Signature of Registered Agent

6. PO Box 395
(Mailing address of initial designated office)

Plymouth, FL 32768

7. If limited partnership elects to be a limited liability limited partnership, check box

2009 AUG 19 AM 10:06
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(H09000183597 3)

(H09000183597 3)

8. Name and business address of each general partner:

Name:	Business Address:
Shun-Chi Huang	PO Box 395, Plymouth, FL 32768
Li-Ying Chuang	PO Box 395, Plymouth, FL 32768

9. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Signed this 17th day of August, 2009.

Signature of each general partner:

<u>S.C.</u>	<u>Chung Li Ying</u>

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

(H09000183597 3)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 AUG 19 AM 10:06

FILED