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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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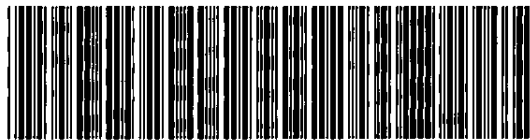
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OCT 27 2009

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SECRETARY OF STATE
DIVISION OF CORPORATION
09 OCT 26 PM 3:23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAR PROPERTIES GROUP, LLLP
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:

ROBERT M. KRAMER

Contact Person

Kramer Green

Firm/Company

4000 Hollywood Blvd., Suite 485- South

Address

Hollywood, FL 33021

City, State and Zip Code

rkramer@kramergreen.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT M. KRAMER at (954) 966-2112

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) ☐ \$1,008.75 Filing Fees and Certificate of Status ☐ \$1,052.50 Filing Fees and Certified Copy ☐ \$1,061.25 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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

1. SAR PROPERTIES GROUP, 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 LLLP.

2. c/o Sindey N. Randel
(Street address of initial designated office)

6275 NW 96 Terrace, Parkland, FL 33076

3. Robert M. Kramer
(Name of Registered Agent for Service of Process)

4. 4000 Hollywood Blvd., Suite 485-South
(Florida street address for Registered Agent)

Hollywood, FL 33021

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.



Signature of Registered Agent

6. 4000 Hollywood Blvd., Suite 485- South
(Mailing address of initial designated office)

Hollywood, FL 33021

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

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8. Name and business address of each general partner:

Name:

Business Address:

Sidney N. Randel

6275 NW 96 Terrace

Parkland, FL 33076

9. Effective date, if other than the date of filing: N/A

(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 10th day of October, 2009.

Signature of each general partner:

S. N. Randel

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75