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	Requestor's Name)
	Address)
	ddress)
(C	ity/State/Zip/Phone #)
PICP	☐ WAIT ☐ MAIL
(8	usiness Entity Name)
(D	ocument Number)
Certified Cor-	Certificates of Status
Special Inons to	Filing Officer:
	A. LUNT
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	NOV <b>23</b> 2009
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Office Use Only

## J. DANIEL BREDE

Professional Association Attorney at Law

Suite 201, East Building 1900 N. W. Corporate Blvd. Boca Raton, Florida 33431 Telephone (561) 241-8996 Facsimile (561) 241-7859 jdbrede1@bells&ath.net

November 3, 2009

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

RE: FLYING DOLLAR RANCH, L.P.

Dear Sir/Madam:

Enclosed please find the Cover Letter and Certificate of Limited Partnership for the above referenced to be filed with the Secretary of State. Also enclosed is a check payable to the Secretary of State in the amount of \$1,000.00. Please return to us a filed copy in the enclosed envelope.

If you have any questions, please call.

J. Wanus Bude

J. DANIEL BREDE

JDB:rc Enclosure

## **COVER LETTER**

TO:	Registration Division of C						
SUBJ	ECT:	F	LYING DOL	LAR RANCH	L.P.		
		lame of Florida Lim				nership	
The e	nclosed Certifi	cate of Limited I	Partnership and	d fees are subn	nitted for filii	ıg.	
Please	e return all cor	espondence con	cerning this m	atter to:			
	J. D.	ANIEL BREDE	, ESQ.				
		Contact Person				$\mathbb{F}_{\sigma}$	70
	J. C	ANIEL BREDE	, P.A.				5
		Firm/Company				Ŧñ.	Ξ
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<u>.</u>		Address				m <sub>C</sub>	
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		CA RATON, FL lity, State and Zip C					بب س
		•				7250	Ó
E	-mail address: (to	DE1@BELLSC be used for future a	unnual report noti	fication)	_		
For fu	orther informat	ion concerning th	nis matter, plea	ase call:			
	J. DANIEL	BREDE, ESQ.	at (	561 ) 241	-8996		
	Name of Conta	ct Person	Arc	ea Code and Dayt	ime Telephone	Number	
Enclo	sed is a check	for the following	amount:				
(\$965 I	00.00 Filing Fees Filing Fee and gistered Agent	\$1,008.75 Filir and Certificate of Status		52.50 Filing Fees rtified Copy	\$1,061.25 Certified Cop Certificate of	y, and	es,
Regis Divisi Clifto 2661	EET ADDRES tration Section ion of Corpora n Building Executive Cen	tions ter Circle		MAILING A Registration Division of C P. O. Box 63 Tallahassee,	Section Corporations 27		

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

	ed Partnership suffixes: Limited Partnership, Limited, L.P., LP. or Lt. ed Liability Limited Partnership suffixes: Limited Liability Limited Pa	
	4866 DRYDEN ROAD	
	(Street address of initial designated office)	
	WEST PALM BEACH, FL 33415	7 S 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	JOHN D. PARKER	15 NOV 20
	(Name of Registered Agent for Service of Process)	SS 2
	4866 DRYDEN ROAD	
	(Florida street address for Registered Agent)	
	WEST PALM BEACH, FL 33415	ORA ARA W
nply with the p	pt the appointment as registered agent and agree to act in this capacitorovisions of all statutes relative to the proper and complete performative with and accept the obligations of my position as registered agent.	
	Signature of Registered Agent	
	Signature of Registered Agent 4866 DRYDEN ROAD	

8. Name and business address of ea Name:	ach general partner: <u>Business Address:</u>	
FLYING DOLLAR MGT.,LLC	4866 DRYDEN ROAD	-
	WEST PALM BEACH, FL 33415	_
	L09-101037	
	BHOWLDAR ALLAHASS	**************************************
	P A	· · · · · ·
	0RIC 39	K <sub>erryn</sub>
9. Effective date, if other than the date of fi	filing:	
	or more than 90 days after the date the document is	
Signed this 3RD day o	of NOVEMBER , 2009 .	
Signature of each general partner: FLYING DOLLAR MGT., LLC		
Member		
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75	