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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1575

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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TALLAHASSEE FLORIDA

FLORIDA/FOREIGN LP/LLLP
JEANNE S. CORLETT FAMILY PARTNERSHIP, LP

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Estimated Charge	$1,000.00

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DIVISION OF CORPORATIONS

T. HAMPTON
DEC - 7 2009
EXAMINER

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

1. JEANNE S. CORLETT FAMILY PARTERSHIP, LP

(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. 6745 SW 89TH TERRACE
(Street address of initial designated office)
PINECREST, FL 33156

3. Corporation Service Company
(Name of Registered Agent for Service of Process)

4. 1201 Hays Street
(Florida street address for Registered Agent)
Tallahassee, FL 32301

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.*

Corporation Service Company
By: [signature] Matthew Young as its agent
Signature of Registered Agent

6. _____
(Mailing address of initial designated office)

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:
EDWARD S. COLLETT	6745 SW 89th TERRACE PINECREST, FL 33156
JEANNE S. COLLETT	6745 SW 89th TERRACE PINECREST, FL 33156

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 20th day of NOVEMBER 2009

Signature of each general partner:

Edward S. Collett

Jeanne Collett

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

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