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.

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To:

Division of Corporations

Eau Mumbar

: (850)617-6383 .

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: 120000000195
Phone: (850)521-1000

Fax Number : (850)558-1575

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

Email Address:_____

FLORIDA/FOREIGN LP/LLLP ARDEN CONSULTING SERVICES, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,000.00

C. LEWIS

DEC 2 3 2009

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Fax SeDer

CERTIFICATE OF LIMITED PARTNERSHIP

FOR

FLORIDA LIMITED PARTNERSHIP

OR

SECRETARY OF STATE

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

LIMITED LIABILITY LIMITED PARTNERSHIP

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

L.L.L.P. or LLLP.
ARDEN CONSULTING SERVICES, LLLP
2. (Street address of initial designated office)
424 Royal Plaza Drive, Fort Lauderdale, FL 33301
3. (Name of Registered Agent for Service of Process)
Martha R. Davis
4. (Florida street address for Registered Agent)
424 Royal Plaza Drive, Fort Lauderdale, FL 33301
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
5. (Mailing address of initial designated office)
P.O. Box 30220, Fort Lauderdale, FL 33303
7. If limited partnership elects to be a limited liability limited partnership, check hox

ax	Server	12/22/2009	11:20:59	AM	PAGE	3/003	Eax-Server		
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						and DEC 2	2 AM 9: 15		
	8. Name and bu	isiness address of each go	eneral partne	r:		2009 DEC.	RY OF STATE SSEE, FLORIDA		
	Name:				Business	ATALLSHA	SSEETITE		
	Arden Consulti	ng Holdings, LLC	j		ox 30220				
	M 0900000 49 (Fort Lauderdale, FL 33303								
		, 10 1000							
			_						
			-	,					
	9. Effective date,	if other than the date of filing:	<u>N/A</u>	* / mmar m % * * * * * *			-		
		cannot he prior to nor mo rida Department of State		lays afi	ter the dat	e the docum	ent is		
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Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Signed this 21st day of December, 2009.

Arden Consulting Holdings, LLC, General Partner

Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75

Signature of each general partner:

Martha R. Davis, Manager of