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Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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L. SELLERS
DEC 23 2009
EXAMINER

To:

Division of Corporations
Fax Number : (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 future annual report mailings. Enter only one email address please.

Email Address:____________________

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TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LP/LLLP

FREDERICK E. BECKER FAMILY PARTNERSHIP, L.P.

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

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TALLAHASSEE FLORIDA

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

1. Frederick E. Becker Family Partnership, L.P.

(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. 4221 SW 82nd Terrace
(Street address of initial designated office)
Gainesville, FL 32608

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

4. 1201 Hays Street, Tallahassee, FL 32301
(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.*

Corporation Service Company
By: [signature] Kimberly B. Moret as its agent
Signature of Registered Agent

6. 4221 SW 82nd Terrace, Gainesville, FL 32608
(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:
Barbara J. Becker	4221 SW 82nd Terrace Gainesville, FL 32608

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 21st day of December, 2009

Signature of each general partner:

Barbara J. Becker G.P.

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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