Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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η'o :

Division of Corporations

Fax Number

: (850)617-6383

APR 28 2010

Faron:

: THE FARR LAW FIRM Account Name

Account Number : 103654001666

Phone Fax Number : (941)639-1158 : (941)639-0028

**EXAMINER** 

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

## FLORIDA/FOREIGN LP/LLLP MBC LIMITED, LLLP

Certificate of Status	0
Certified Copy	0
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April 22, 2010

THE FARR LAW FIRM

SUBJECT: MBC LIMITED, LLLP

REF: W10000019653

We have received your document for MBC LIMITED, LLLP and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P10000002635.

Please seturn your document, along with a copy of this letter, within 60 cays or your filing will be considered abandoned.

you have any questions concerning the filing of your document, please cell (850) 245-6967.

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Leslie Sellers Regulatory Specialist II FAX Aud. #: H10000092859 Letter Number: 310A00009963



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Florida Dept. of State – Division of Corporations 850 @7 6383

ESTATE PLANNING

Barbara Lockhart 941-639-1158 ext. 275

REAL ESTATE
TILLE INSURANCE

4/27/10

MARITAL & FAMILY

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ENVIRONMENTAL

Annual Report Filings

LAND USE

NUMBER OF PAGES INCLUDING COVER SHEET: 5

BUSINESS

Fax Operator: Barbara Lockhart ext. 275

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ELDER LAW ASSET PROTECTION

We will send the original by: MAIL OVERNIGHT If neither is checked, no original will be sent.

EARL 13. FARR, 1900 ~ 1988

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EARL DRAYTON FARR, JR. Senior Counsel

ei | MESSAGE:

TO:

FROM:

DATE:

RE:

GUY S. EMERICH FJ. Bar Board Certified Wills, Trusts & Estates Lawyer

Please see the attached.

JACK O. HACKETT II 11. Bar Board Certified

Real Estate Lawyer CHARLES T. BOYLE TI. Bar Board Certified Marital & Family Lawyer

DAROL H.M. CARR

DAVID A, HOLMES Certified Circuit Court Mediator

> GARY A. KAIILE FL Bar Board Certified Real Estate Lawyer

JENNIFER R. HOWELL Fl. Bar Board Certified Elder Law Lawyer

ROGER H. MILLER III

DOROTHY L. KORSZEN

WILL W. SUNTER

FORREST L BASS

NATALIE C. LASHWAY

## CERTIFICATE OF LIMITED PARTNERSHIP

## MBC LIMITED PARTNERS, LLLP

On this  $\frac{2}{3}$  day of  $\frac{1}{3}$  day of  $\frac{1}{3}$ , 2010, the undersigned, being authorized to form a limited liability limited partnership (the "Partnership") pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act, as amended (the "Act"), hereby certify as follows:

- 1. Name and Limited Liability Status. The name of the Partnership is MBC LIMITED PARTNERS, LLLP. The Limited Partnership elects limited liability limited partnership status.
- 2. Registered Agent and Registered Office. The name and address of the Partnership's registered agent and registered office address as required to be maintained by Fl.A. STAT. § 620.105 is David A. Holmes, 99 Nesbit Street, Punta Gorda, Florida 33950.
- 3. <u>Business Address</u>. The business and mailing address of the Partnership is 99 Nesbit Street, Punta Gorda, FL 33950.
- 4. <u>General Partner</u>. The name and address of the General Partner of the Partnership is:

Bernard C. Johnson P.O. Box 7 Matlacha, FL 33993

- 5. <u>Period of Existence</u>. The period of existence of the Partnership shall commence upon the filing of this Certificate of Limited Partnership with the Florida Department of State-Corporations Division and shall continue until dissolution January 1, 2108.
- 6. <u>Limited Partnership Agreement</u>. Any limited partnership agreement of the Partnership (the "Limited Partnership Agreement") must be in writing.
- 7. Management. The Partnership shall be managed by its General Partner in accordance with the procedures prescribed in the Limited Partnership Agreement; provided, however, that without prior written consent or authorization by the majority in interest of the Limited Partners of the Partnership, no General Partner shall be authorized to take any action set forth below:
- a. commit act in contravention or violation of this certificate of limited partnership or the limited partnership agreement;
- b. commit any act which would make it impossible to carry on the ordinary business of the partnership;
  - c. confess a judgment against the partnership;

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- d. possess any partnership property, or assign the rights of the partners in partnership property, for other than a partnership purpose;
- e. assign partnership property or assets in trust for creditors or on the basis of an assignee's promise or undertaking to pay the debts or obligations of the partnership;
  - f. commingle partnership funds with the funds of others, or
- g. admit a person or entity as a general partner of the partnership except as provided in the limited partnership agreement.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Limited Partnership as the General Partner of the Partnership.

## ACCEPTANCE

Having been named as registered agent and to accept service of process for the above stated limited liability partnership at the place designated in this certificate, 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

ØAVID A. HOLMES

Registered Agent

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