Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: BARNETT, BOLT, KIRKWOOD, LONG & MCBRI

Account Number : 072731001155

Phone

: (813)253-2020

Fax Number

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\*\*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 SGL Real Estate Limited Partnership

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**EXAMINER** 

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Corporate Filing Menu

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May. 21. 2010 10:04AM

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Barnett, Bolt

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No. 5376 : P. 2

2010 MAY 2:1 AM 8: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

1 SGL Real Estate Limited Partnership
(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 LLL.P.
2, 140 Fountain Parkway, Ste. 420
(Street address of initial designated office)
St. Petersburg, FL 33716
3. David L. Koche
(Name of Registered Agent for Service of Process)
4,601 Bayshore Boulevard, Ste. 700
(Florida street address for Registered Agent)
Tampa, FL 33606
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 an accept the obligations of my position as registered agent.  Signature of Registered Agent
6 140 Fountain Parkway, Ste. 420
(Mailing address of initial designated office)
St. Petersburg, FL 33716
7. If limited partnership elects to be a limited liability limited partnership, check box

Page 1 of 2

H10000121464

## 2010 MAY 24 AM 8: 49

SECRETARY OF STATE TALLAHASSEE, FLORIDA

<ol><li>Name and business address of e Name;</li></ol>	each general partner: <u>Business Address:</u>	TALEAMASSEE. FLUKIUA		
QCP Ventures, Inc.		140 Fountain Parkway, Ste. 420		
P05000152682	St. Petersburg,	St. Petersburg, FL 33716		
	Commence of the Commence of th			
	**************************************	,		
9. Effective date, if other than the date of	filing;			
(Effective date cannot be prior to n filed by the Florida Department of t	or more than 90 days after the s State.)	date the document is		
Signed this 20 <sup>++</sup> day of	of May	2010		
Signature of each general partner:				
OCP VENTURES, INC.		The second secon		
Stuart G. Lesher, President				
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$ \$52.50 \$8.75 Page 2 of 2	35 Registered Agent Fee)		