

A100000000463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

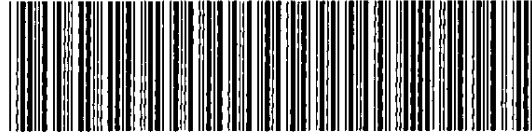
Special Instructions to Filing Officer:

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B. KOHR

AUG 25 2010

EXAMINER



900182929889

08/24/10--01011--008 **1362.50

CORAFLLP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 AUG 19 AM 10:15

Advanced Incorporating Service, Inc.

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: orders@advancedincorporating.com
Website: www.advancedincorporating.com

| | |
|----------------|--|
| NAME OF ENTITY | FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 10 AUG 19 AM 10:15 FOR OFFICE USE ONLY |
| | |
| | |
| | |

PICK ONE:

☐ CERTIFIED COPY ☐ PHOTOCOPY

FILING:

☐ CORPORATION ☐ LLC ☐ LIMITED PARTNERSHIP ☐ GENERAL PARTNERSHIP

☐ FICTITIOUS NAME ☐ SERVICE MARK/TRADEMARK ☐ AMENDMENT

☐ FOREIGN QUALIFICATION ☐ JUDGMENT LIEN

☐ OTHER

RETRIEVAL:

☐ GOOD STANDING CERT/C.U.S. ☐ CERTIFIED COPY ☐ PHOTOCOPY

Of _____

APOSTILLE/CERTIFICATION REQUEST:

Country _____

Amount of Documents _____

DATE _____ TIME _____

Notes: _____

8. Name and business address of each general partner:

Name:

Business Address:

Myers Family Management, LLC

712 S. Oakwood

Brandon, FL 33511

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 5th day of May, 2010.

Signature of each general partner:

MYERS FAMILY MANAGEMENT, LLC

By: Harold J. Myers
Harold J. Myers, MGRM

By: Stacy A. Myers
Stacy A. Myers, MGRM

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 AUG 19 AM 10:15

1. H. J. MYERS FAMILY LIMITED PARTNERSHIP

(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. 712 S. Oakwood
(Street address of initial designated office)

Brandon, Florida 33511

3. Jeffrey M. Lasman
(Name of Registered Agent for Service of Process)

4. 8152 Delancey Station St., Suite 205
(Florida street address for Registered Agent)

Riverview, FL 33578

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

6. 712 S. Oakwood
(Mailing address of initial designated office)

Brandon, Florida 33511

7. If limited partnership elects to be a limited liability limited partnership, check box ☐