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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

000262.132218

*File Second,
after GP has
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA/FOREIGN LP/LLP

TSCPR P1000, LTD., SE

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$1,052.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
SEP 20 2010
EXAMINER

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Corporate Filing Menu

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2010 SEP 17 PM 4:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. TSCPR P1000, LTD., SE

(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. 5858 Central Avenue
(Street address of initial designated office)

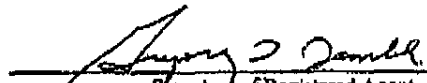
St. Petersburg, FL 33707-1728

3. Gregory S. Sembler
(Name of Registered Agent for Service of Process)

4. 5858 Central Avenue
(Florida street address for Registered Agent)

St. Petersburg, FL 33707-1728

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. 5858 Central Avenue
(Mailing address of initial designated office)

St. Petersburg, FL 33707-1728

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

TSCPR P1000, Inc.

5858 Central Avenue

P10000076440

St. Petersburg, FL 33707-1728

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 16th day of September 2010

Signature of each general partner:

Shay J. Smith

President

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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