

A10000000860

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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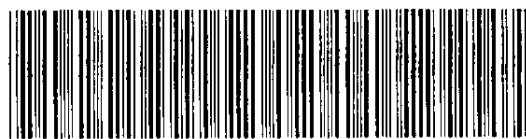
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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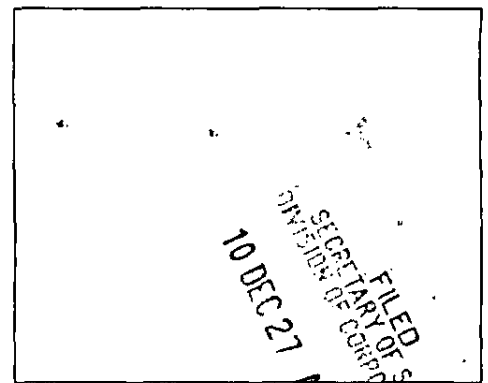
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EXAMINER

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ENTITY NAME:

SU FAMILY, LLLP

CK# 4939 FOR \$1061.25

PLEASE FILE THE ATTACHED CERTIFICATE OF LIMITED PARTNERSHIP &  
RETURN THE FOLLOWING:

XXX CERTIFIED COPY

\_\_\_ STAMPED COPY

XXX CERTIFICATE OF STATUS

Examiner's Initials

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 DEC 27 AM 10:03

1. **Su Family, LLLP**

(Name of Limited Partnership or Limited Liability 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. 12185 S. Dixie Highway, Miami, FL 33156

(Street Address of initial designated office)

3. Atrium Registered Agents, Inc.

(Name of Registered Agent for Service of Process)

4. 1500 San Remo Avenue, Suite 125, Coral Gables, Florida, 33146

(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.

Atrium Registered Agents, Inc.

By: *Ralph Nardi*  
Ralph Nardi, Vice President

6. 12185 S. Dixie Highway, Miami, FL 33156

(Mailing address of the initial designated office)

7. If the limited partnership elects to be a limited liability limited partnership check:

XX Yes \_\_\_\_\_ No

8. Name and business address of each general partner:

Su Family Management, LLC  
12185 S. Dixie Highway  
Miami, FL 33156

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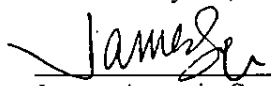
9. Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date the document is  
filed by the Florida Department of State.)

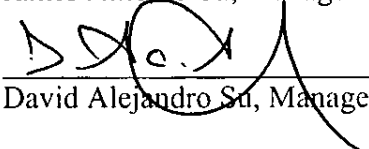
Signed this 23<sup>rd</sup> day of December, 2010.

Signature of Each General Partner:

Su Family Management, LLC  
General Partner

By:   
Sixto Henry Su, Manager

By:   
James Antonio Su, Manager

By:   
David Alejandro Su, Manager