A 11000000088

| (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: |
| A. LUNT |
| JAN 2 7 2010 |

EXAMINER

Office Use Only



500189058495

01/03/11--01030--009 **1008.75

2011 JAN 26 PM 4: 88
SEGRETARY OF STATE
PALLAHASSEE, FI BRIDA

2011 JAN 26 PH 4: 01

COVER LETTER

| Division of Corporations | |
|--|---|
| SUBJECT: Henry Halle III | |
| Name of Florida Limited Par | tnership or Limited Liability Limited Partnership |
| The enclosed Certificate of Limited Partners | ship and fees are submitted for filing. |
| Please return all correspondence concerning | g this matter to: |
| Henry Halle III | |
| Contact Person | |
| | 201 TALI |
| Firm/Company | |
| 2885 Gulf Shore Blvd North | LAHA LAHA |
| Address |) 77 30/_ |
| Name | |
| Naples FL 34103-4346 | |
| City, State and Zip Code | SIAT |
| Henryhalle@comcast.net | |
| E-mail address: (to be used for future annual re | port nouncation) |
| For further information concerning this mat | ter, please call: |
| Stephen Balton | at (901) 271-3101 |
| Name of Contact Person | Area Code and Daytime Telephone Number |
| Enclosed is a check for the following amoun | nt: |
| \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) \$1,008.75 Filing Fees and Certificate of Status | \$1,052.50 Filing Fees and Certified Copy S1,061.25 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| Clifton Building | P. O. Box 6327 |
| 2661 Executive Center Circle | Tallahassee, FL 32314 |

CR2E030 (01/06)

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

1. Henry Halle 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.P. or LLLP.

| (Street address of initial designated office) | · · · · · · · · · · · · · · · · · · · | _ |
|--|---------------------------------------|--------|
| Naples FL 34103-4346 | \mathbf{z}_{c} | _ |
| 3. Henry Halle III | E GRE | |
| (Name of Registered Agent for Service of Process) | | |
| 4,2885 Gulf Shore Blvd North | SE - | ` T |
| (Florida street address for Registered Agent) | <u> </u> | Ţ |
| Naples FL 34103-4346 | (A S | |
| 5. I hereby accept the appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete performance | - | |
| Signature of Registered Agent 6. 2885 Gulf Shore Blvd North (Mailing address of initial designated office) | | - |

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

| HH Management CO LI | C 2885 Gulf Shore Blvd North # |
|--|--|
| | Naples FL 34103-4346 |
| | |
| | |
| | |
| | Z ₅ 20 |
| | LAHASS |
| | |
| | |
|). Effective date, if other than the date o | |
| Effective date cannot be prior to i iled by the Florida Department of | nor more than 90 days after the date the document is f State.) |
| signed this day | of DECEMBER 2010 |
| stated herein are true. I/We am/are | I/We submit this document and affirm that the facts aware that any false information submitted in a ate constitutes a third degree felony as provided for in |
| gorde h | |

Page 2 of 2