

A 110000000365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

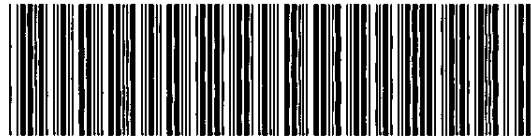
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B. KOHR

MAY 16 2011

EXAMINER



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11 MAY 13 PM 4:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY 13 AM 8:27
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DIVISION OF CORPORATIONS
11 MAY 13 AM 8:27

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: RICKY SOTO

DATE: 05/13/2011

REF. #: 000466.148118

CORP. NAME: GOLDSTEIN FAMILY INVESTMENTS, LP

FILE SECOND

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SECRETARY OF CORPORATIONS
11 MAY 13 AM 8:27

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- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input checked="" type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 539787 FOR \$ 1,052.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**CERTIFICATE OF LIMITED PARTNERSHIP OF
GOLDSTEIN FAMILY INVESTMENTS, LP
(a Florida limited partnership)**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY 13 AM 8:27

Pursuant to the provisions of Section 620.1201 of the Florida Statutes, the undersigned, being the sole General Partner of **GOLDSTEIN FAMILY INVESTMENTS, LP**, hereby duly executes and files with the Florida Department of State this Certificate of Limited Partnership.

1. The name of the limited partnership is "**GOLDSTEIN FAMILY INVESTMENTS, LP**" (the "**Limited Partnership**").

2. The street and mailing address of the Limited Partnership's initial designated office in the State of Florida is 16390 Maddalena Place, Delray Beach, Florida 33446.

3. The name of the Limited Partnership's initial registered agent is Steven W. Goldstein, and the street address of the initial registered agent is 16390 Maddalena Place, Delray Beach, Florida 33446.

4. The name of the Limited Partnership's sole general partner is **GOLDSTEIN FAMILY MANAGEMENT, LLC**, a Florida limited liability company and the business address of such general partner is 16390 Maddalena Place, Delray Beach, Florida 33446.

The sole General Partner of **GOLDSTEIN FAMILY INVESTMENTS, LP** has executed the foregoing Certificate of Limited Partnership on this 13th day of MAY, 2011 in accordance with Section 620.1204 of the Florida Statutes.

GOLDSTEIN FAMILY MANAGEMENT, LLC,
a Florida limited liability company, General Partner

By: 

STEVEN W. GOLDSTEIN, Manager

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DIVISION OF CORPORATIONS
11 MAY 13 AM 8:27

Acceptance of Appointment of Registered Agent

Having been named the statutory registered agent of **GOLDSTEIN FAMILY INVESTMENTS, LP**, at the place designated in the foregoing Certificate of Limited Partnership of **GOLDSTEIN FAMILY INVESTMENTS, LP**, I hereby accept such designation and confirm that I am familiar with and agree to accept the obligations imposed by §620.1114 of the Florida Statutes and I agree to comply with the provisions of Florida Law relative to keeping the registered office open.



STEVEN W. GOLDSTEIN, Registered Agent

Date: MAY 13, 2011