

A110000000447

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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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

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA/FOREIGN LP/LLP
OCEAN BLUE COMMERCIAL HOLDINGS, LIMITED
PARTNERSHIP

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

T. HAMPTON

JUN 1 8 2011

Electronic Filing Menu

Corporate Filing Menu

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EXAMINER

File Second
File after
BirdCage on Duval Inc.

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE
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JANEL HASSER, FLORIDA
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June 14, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PLEASE GIVE ORIGINAL SUBMISSION
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6/13/11

CORPDIRECT AGENTS INC

SUBJECT: OCEAN BLUE COMMERCIAL HOLDINGS, LIMITED PARTNERSHIP
REF: W11000032222

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

If you have any further questions concerning your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H11000156983
Letter Number: 411A00014466

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

1. OCEAN BLUE COMMERCIAL HOLDINGS, 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. 824 DUVAL STREET, KEY WEST, FL 33040

(Street address of initial designated office)

3. NRAI Services, Inc.

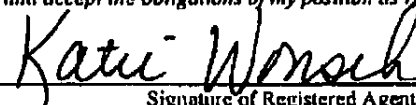
(Name of Registered Agent for Service of Process)

4. 515 East Park Avenue

(Florida street address for Registered Agent)

Tallahassee, Florida 32301

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 **Katie Wonsch**
Assistant Secretary

6. P.O. BOX 1512, KEY WEST, FL 33041-1512

(Mailing address of initial designated office)

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


8. Name and business address of each general partner:

Name:Business Address:Birdcage on Duval, Inc.P.O. Box 4269Key West, FL 33041-4269

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 10th day of June, 2011

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



General Partner, 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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DIVISION OF CORPORATIONS
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