

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000214468 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195 : (850)521-1000 Phone

Fax Number

: (850)558-1515

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

Winail Address:

FLORIDA/FOREIGN LP/LLLP VELA FAMILY LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,000.00

Electronic Filing Menu

Corporate Filing Menu

Help

B. BOSTICK

AUG 3 1 2011

EXAMINER

EFFECTIVE DATE 68-29-11

CERTIFICATE OF LIMITED PARTNERSHIP

OF

VELA FAMILY LIMITED PARTNERSHIP a Florida Limited Partnership

The undersigned General Partner desiring to form a limited partnership pursuant to section 620.1201 of the Florida Statutes, hereby states the following:

- 1. The name of the limited partnership is VELA FAMILY LIMITED PARTNERSHIP (the "Partnership").
- 2. The street address and mailing address of the initial designated office of the Partnership is One Harbourside Drive, #2707, Delray Beach, FL 33483.
 - 3. The name and address of the Registered Agent of the Partnership is:

VELA INVESTMENTS, LLC One Harbourside Drive, #2707 Delray Beach, FL 33483

Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

By: Juy Velo____ Registered Agent's Signature

4. The name and address of each General Partner is as follows:

VELA INVESTMENTS, LLC
One Harbourside Drive, #2707
Delray Beach, FL 33483

11000099024

5. The mailing address of the Partnership is One Harbourside Drive, #2707, Polray Beach, FL 33483.

6. The Effective Date shall be August 29, 2011

AUG 29 AH 9: 55

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section \$17.155, Florida Statutes.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the General Partner of the VELA FAMILY LIMITED PARTNERSHIP on this <u>29</u> day of <u>august</u>. 2011.

GENERAL PARTNER:

VELA INVESTMENTS, LLC, a Florida Limited Liability Company

BY:

GAY VELA,

as Manager

11 AUG 29 AH 9:51