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Division of Corporations

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**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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Division of Corporations  
Fax Number : (850) 617-6383

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Email Address: william.lane@hklaw.com

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TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LP/LLP  
Linton Family Investments, LLLP**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$1,052.50

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Corporate Filing Menu

**T. HAMPTON**

NOV -7 2011

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

1. Linton Family Investments, LLLP

(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.

2. 3546 37<sup>th</sup> Street North, St. Petersburg, Florida 33713

(Street address of initial designated office)

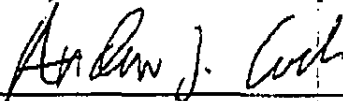
3. Linton Family Management, LLC

(Name of Registered Agent for Service of Process)

4. 3546 37<sup>th</sup> Street North, St. Petersburg, Florida 33713

(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.*



Andrew J. Coch, as Manager  
of Linton Family Management, LLC,  
the Registered Agent

6. 3546 37<sup>th</sup> Street North, St. Petersburg, Florida 33713

(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:

Linton Family Management, LLC

Business Address:

3546 37<sup>th</sup> Street North,  
St. Petersburg, Florida 33713

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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 4th day of November, 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.

Linton Family Management, LLC

By: \_\_\_\_\_

Andrew J. Coch, Manager

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Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
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