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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

: ZIMMERMAN, KISER, & SUTCLIFFE, P.A. Account Name

Account Number : I19990000006 : (407) 425-7010 Phone Fax Number : (407) 425-2747

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

FLORIDA/FOREIGN LP/LLLP Strawberry Fields Property Holdings, Ltd.

age Count	03
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NOV 28 2011

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

1.	STRAWBERRY	FIELDS	PROPERTY	HOLDINGS	LTD.
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(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.

or LLLP.	•
2. 315 E. ROBINSON STREET, SUITE 600, ORLANDO, FLORIDA 32801	7A11
(Street address of initial designated office)	2011 NOV 2
3. N. DWAYNE GRAY, JR., ESQUIRE	SSER A
(Name of Registered Agent for Service of Process)	77.0
4, 315 E. ROBINSON STREET, SUITE 600, ORLANDO, FLORIDA 32801	97
(Florida street address for Registered Agent)	DE
5. I hereby accept the appointment as registered agent and agree to act in this capacity. I furticomply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent. By: By: Signature of Registered Agent	
6. 315 E. ROBINSON STREET, SUITE 600, ORLANDO, FLORIDA 32801	
(Mailing address of initial designated office)	

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

Page 1 of 2

8. Name and business address of each Name: #FI100000 (4696	Business Address:	
Strawberry Fields General Partner, Inc.	315 E. Robinson Street, Suite 600	
rarenery inc.	Orlando, Florida 32801	_
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9. Effective date, if other than the date of fill	ing: Upon filing	
	more than 90 days after the date the document is	
filed by the Florida Department of Sta	ate.)	
Signed this 22 rd day of	November 2011	
	Ve submit this document and affirm that the facts	
	vare that any false information submitted in a constitutes a third degree felony as provided for in	
5.817.155 F.S.		
- Alex NA		-
FARMIZIO LHOHESP		-
Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)	-
	\$52.50 \$8.75	

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