

#A11000000965

Dec 21, 2011, 10:57 AM
Division of Corporations

Barnett, Bolt

No. 2079

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : BARNETT, BOLT, KIRKWOOD, LONG & MCBRIDE
Account Number : 072731001155
Phone : (813) 253-2020
Fax Number : (813) 251-6711

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

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FLORIDA/FOREIGN LP/LLLP
RSM Gifting Fund, Ltd.

Certificate of Status	1
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K. SALLY
EXAMINER
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FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. RSM Gifting Fund, Ltd.

(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. 1819 Main Street, Ste. 1301

(Street address of initial designated office)

Sarasota, FL 34236

3. David L. Koche

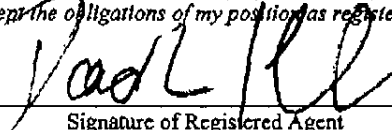
(Name of Registered Agent for Service of Process)

4. 601 Bayshore Boulevard, Ste. 700

(Florida street address for Registered Agent)

Tampa, FL 33606

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

6. 1819 Main Street, Ste. 1301

(Mailing address of initial designated office)

Sarasota, FL 34236

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:

Four Sons Management, LLC

1819 Main Street, Ste. 1301

Sarasota, FL 34236

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 20th day of December, 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.

FOUR SONS MANAGEMENT, LLC,
a Delaware limited liability company

By: _____

David L. Koche, Authorized Representative

Filing Fees: **\$1,000.00** (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional): **\$52.50**

Certificate of Status (optional): **\$8.75**