

A12000000292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

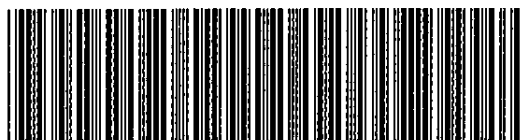
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 MAY 22 AM 04:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

MAY 23 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2012

PETER HOLZWORTH
265 S. FEDERAL HWY., #301
DEERFIELD BEACH, FL 33441

SUBJECT: THOMPSON MACTAVISH FIXED ASSET OPPORTUNITY FUND LP
Ref. Number: W12000026584

We have received your document for THOMPSON MACTAVISH FIXED ASSET OPPORTUNITY FUND LP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline
Regulatory Specialist II

Letter Number: 512A00014222

FILED
2012 MAY 22 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Thompson MacTavish Fixed Asset Opportunity Fund LP
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Peter Holzworth

Contact Person

Thompson MacTavish Management LLC

Firm/Company

265 S. Federal Hwy., #301

Address

Deerfield Beach, FL 33441

City, State and Zip Code

LindaCoviello@charter.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Peter Holzworth

Name of Contact Person

at (561) 699-2172

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$1,000.00 Filing Fees
(\$965 Filing Fee and
\$35 Registered Agent
Fee) | <input type="checkbox"/> \$1,008.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$1,052.50 Filing Fees
and Certified Copy | <input type="checkbox"/> \$1,061.25 Filing Fees,
Certified Copy, and
Certificate of Status |
|--|---|---|--|

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

CR2E030 (01/06)

FILED
2012 MAY 22 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. Thompson MacTavish Fixed Asset Opportunity Fund LP

(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. 265 S. Federal Hwy., #301

(Street address of initial designated office)

Deerfield Beach, FL 33441

3. Peter Holzworth

(Name of Registered Agent for Service of Process)

4. 3184 N. Greenleaf Circle

(Florida street address for Registered Agent)

Boynton Beach, FL 33426

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. 265 S. Federal Hwy., #301

(Mailing address of initial designated office)

Deerfield Beach, FL 33441

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

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8. Name and business address of each general partner:

Name:

Business Address:

Thompson MacTavish Management LLC

265 S. Federal Hwy., #301

Deerfield Beach, FL 33441

L12-67016

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 23 day of April, 2012

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

Pike H. Hester
Manager of GP

2012 MAY 22 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75