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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Guerrier Family Limited	
Name of Florida Limited Pa	rtnership or Limited Liability Limited Partnership
The enclosed Certificate of Limited Partner	rship and fees are submitted for filing.
Please return all correspondence concerning	g this matter to:
Valerie Lopez	
Contact Person	
Jonathan H. Green & Associates, P.A	
Firm/Company	
799 Brickell Plaza, Suite 700	
Address	
Miami, Florida 33131 City, State and Zip Code	
vl@jhglaw.com	
E-mail address: (to be used for future annual r	eport notification)
For further information concerning this mat	tter, please call:
Valerie Lopez	at (305) 372-5100
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amou	nt:
\$1,000.00 Filing Fees \$1,008.75 Filing Fees and \$35 Registered Agent Fee) \$1,008.75 Filing Fees and Certificate of Status	\$1,052.50 Filing Fees and Certified Copy \$1,061.25 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314

CR2E030 (01/06)

CERTIFICATE OF LIMITED PARTNERSHIP

OF THE

GUERRIER FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

THIS CERTIFICATE is duly executed and filed pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986), as amended (the "Act"), in order to form a limited partnership under the Act.

- (a) <u>Name</u>. The name of the subject limited partnership is the GUERRIER FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP (the "Partnership").
- **Recordkeeping Office.** The address of the office at which the Partnership shall keep the records required to maintained under the Act is:

3315 Bridle Path Lane Weston, Florida 33331

<u>Registered Agent</u>; <u>Registered Office</u>. The name and address of the agent for service of process on the Partnership required to be maintained under the Act are:

Jonathan H. Green & Associates, P.A. 799 Brickell Plaza, Suite 700 Miami, FL 33131

(c) General Partner. The names and business address of the General Partner(s) are:

Joseph F. Guerrier, M.D., FACP, Trustee Fleurette Guerrier, Trustee

(d) Mailing Address. The mailing address of the Partnership is:

3315 Bridle Path Lane Weston, Florida 33331

(e) <u>Term.</u> The latest date upon which the Partnership is to dissolve is December 31, 2061.

(f) <u>Election</u>. If limited partnership elects to be a limited liability limited partnership, check box **T**.

IN WITNESS WHEREOF, the general partner has duly executed this

Certificate, this 25 day of Otto 20, 2012.

WITNESSES:

Print name: Recht Toll

Print name: A LO C DOO2

JOSEPH F. GUERRIER, M.D., FACP, Trustee, his successor(s) as trustee(s) of the Joseph F. Guerrier, M.D., FACP, Revocable

Living Trust, General Partner

Print name: Ruch Tollm

FLEURETTE GUERRIER, Trustee, her successor(s) as trustee(s) of the Fleurette Guerrier Revocable Living Trust, General Partner

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Print name: 10000