A12000000981

(1	Requestor's Name)		
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ALLAHAMS OF STATE



ACCOUNT NO. : 12000000195 REFERENCE: 471318 4328337 AUTHORIZATION : COST LIMIT : ORDER DATE: December 21, 2012 ORDER TIME : 3:21 PM ORDER NO. : 471318-010 & pls file 2nd & CUSTOMER NO: 4328337 DOMESTIC FILING NAME: PROGRESSIVE FUELS LIMITED EFFECTIVE DATE: _ ARTICLES OF INCORPORATION XX CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ____ PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Carina L. Dunlap - EXT. 52951

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

1. PROGRESSIVE FUELS LIMITED
(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. 1865 Veterans Park Drive, Suite 303
(Street address of initial designated office)
Naples, FL 34109
3. Curtis R. Chandler
(Name of Registered Agent for Service of Process)
4, 1865 Veterans Park Drive, Suite 303
(Florida street address for Registered Agent)
Naples, FL 34109
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, 1865 Voterans Park Drive, Suite 303
(Mailing address of initial designated office)
Naples, FL 34109
7. If limited partnership elects to be a limited liability limited partnership, check box

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 Name and business address of each Name: 	n general partner: <u>Business Address:</u>
Progressive Fuels Management, Inc.	1865 Veterans Park Drive, Suite 303
	Naples, FL 34109
•	
	V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-
9. Effective date, if other than the date of fil	ling: January 1, 2013
filed by the Florida Department of St	•
Signed this 19th day of	December , 2012
Signature of each general partner: I/V stated herein are true. I/We am/are av	We submit this document and affirm that the facts ware that any false information submitted in a constitutes a third degree felony as provided for in
By Citto Cran	
Curtie R. Chandler Director)
Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75 Page 2 of 2