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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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ALLAHASSEE, FLORID

J. SAULSBERRY EXAMINER

FEB 21 2013



Stephanie Rossi srossi@phmmlegal.com

February 19, 2013

VIA OVERNIGHT DELIVERY

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

Re: Sweetwater Lane Investment Associates, Limited Partnership

Dear Sir/Madam:

Enclosed for filing please find an original Certificate of Limited Partnership for Florida Limited Partnership or Limited Liability Limited Partnership and a check in the amount of \$1,052.50 for payment of the filing fees and a certified copy.

Thank you for your prompt attention to this matter.

Sincerely,

Stephanie Rossi Legal Assistant 2013 FEB 20 AM & 08

Encs.

www.pbmmlegal.com

Direct correspondence to: 50 Exchange Terrace Suite 320 Providence, RI 02903 Tel (401) 453-0550 Fax (401) 421-7806

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Sweetwater Lane Investment Associates, Limited Partnership 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:	
Amedeo C. Merolla, Esq.	
Contact Person	٠,
Merolla & Accetturo	•
Firm/Company	٠
469 Centerville Road, Suite 206	201
Address	OI3FEB
Warwick, Rhode Island 02886	
City, State and Zip Code	<u>₹</u> 5
E-mail address: (to be used for future annual report notification)	A
For further information concerning this matter, please call:	87 68 80 88
Amedeo C. Merolia, Esq. at (401) 739-2900 x 301	
Name of Contact Person Area Code and Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$1,000.00 Filing Fees \$1,008.75 Filing Fees and \$1,008.75 Filing Fees and Certificate of and Certified Copy and Certificate of Status \$1,000.00 Filing Fees \$1,008.75 Filing Fees and Certified Copy and Certified Copy, and Certificate of Status \$1,000.00 Filing Fees and Certified Copy and Certificate of Status	: ·
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

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

CR2E030-(01/06)

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

[Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix] Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., L.P., or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L. or LLLP.	
2, 1262 Sweetwater Lane, Unit 1503	
(Street address of initial designated office)	
Naples, Florida 34110	<u> </u>
3. CT Corporation Systems	ARA ARA
(Name of Registered Agent for Service of Process)	25/2
4.1200 South Pine Island Road	2
(Florida street address for Registered Agent)	<u></u>
Plantation, FL 33324	
5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree 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	Ti =:
6. c/o Amedeo C. Merolia, Esq., 469 Centerville Road, Suite 206	
(Mailing address of initial designated office)	_
Warwick, Rhode Island 02886	
7. If limited partnership elects to be a limited liability limited partnership, check box	

Name:		Business Address:	
Augustus F. Marsella	<u> </u>	1262 Sweetwater Lane, Unit 1503 Naples, Florida 34110	
	- 1		
Steven R. Marsella		1500 Phenix Avenue	
		Cranston, RI 02921	
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Effective date, if other than the	tate of filing: UP	on filing	25 95
filed by the Florida Departme		than 90 days after the date the docume	ent is
stated herein are true. I/We as document to the Department s.817.155, F.S.	m/are aware th	mit this document and affirm that the sat any false information submitted in a tutes a third degree felony as provided	t
Steven K M C	inselfa		
Filing Fees: Certified Copy (optional):	\$1,000 \$52.50	0.00 (\$965 Filing Fee and \$35 Registered Ag	crit Fee)

Page 2 of 2