

A13000000597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800252281668

10/02/13--01018--018 **1052.50

FILED

2013 OCT -2 PM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Gulligan OCT -3 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TBG INVESTMENT PARTNERS, LLLP

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:

TIM HART

Contact Person

Firm/Company

2929 EAST COMMERCIAL BLVD., PH-D

Address

FT LAUDERDALE, FL 33308

City, State and Zip Code

THART@TBGHOLDINGS.COM

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

For further information concerning this matter, please call:

TIM HART

at (**954**) **440-4678**

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$1,000.00 Filing Fees (\$965 Filing Fee 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:

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

FILED

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

2013 OCT -2 PM 12: 08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. TBG INVESTMENT PARTNERS, LLLP

(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. 2929 EAST COMMERCIAL BLVD., PH-D

(Street address of initial designated office)

FT LAUDERDALE, FL 33308

3. TIM HART

(Name of Registered Agent for Service of Process)

4. 2929 EAST COMMERCIAL BLVD., PH-D, FT LAUDERDALE, FL 33308

(Florida street address for Registered Agent)

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. _____
(Mailing address of initial designated office).

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

8. Name and business address of each general partner:

Name: P12-26994

Business Address:

TBG HOLDINGS CORPORATION

2929 E. COMMERCIAL BLVD., PH-D

FT LAUDERDALE, FL 33308

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 OCT - 2 PM 12: 08

FILED

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 24th day of SEPTEMBER, 2013.

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.



TIMOTHY HART

CEO

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75