

12/19/2013 16:37 FAX

Division of Corporations

001/003

Page 1 of 1

**A13000000772**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000276512 3)))



H130002765123ABC.

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : BAKER & MCKENZIE  
Account Number : 074222002135  
Phone : (305) 789-8900  
Fax Number : (305) 789-8953  
Our file # : 50185303.000001

FILED  
13 DEC 19 AM 7:38  
TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: cecilia.reategui@bakermckenzie.com

**FLORIDA/FOREIGN LP/LLLP**  
**248 Springline Drive Limited Partnership**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$1,052.50

RECEIVED  
13 DEC 19 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

DEC 20 2013

(((H13000276512 3)))

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

1. 248 SPRINGLINE DRIVE LIMITED PARTNERSHIP

(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 L.L.P.

2. 248 Springline Drive, Vero Beach, FL 32963

(Street address of initial designated office)

3. Gould Cooksey Fennell

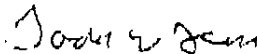
(Name of Registered Agent for Service of Process)

4. 979 Beachland Boulevard

(Florida street address for Registered Agent)

Vero Beach, FL 32963

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. 248 Springline Drive, Vero Beach, FL 32963

(Mailing address of initial designated office)

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

(((H13000276512 3)))

13 DEC 19 AM 7:38

FILED

TALLAHASSEE, FLORIDA

(((H13000276512 3)))

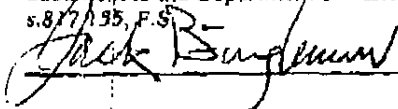
## 8. Name and business address of each general partner:

Name:Business Address:Six Bridges Corp.80 Sherwood Street, Bobcaygeor(F13000005388)Ontario K0M 1A0 CanadaFILED  
13 DEC 19 AM 7:38  
TALLAHASSEE, FLORIDA

## 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 17th day of December, 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. 817.95, F.S.



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

(((H13000276512 3)))