

A14000000067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

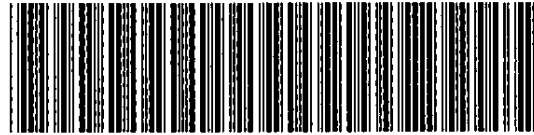
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100256125151

01/31/14--01001--020 **1000.00

RECEIVED
2014 JAN 30 PM 2:21
TO: COMPTROLLER
SUSPENSION OF FILING

2014 JAN 30 PM 8:51
FALLS CHURCH, VA
FALLS CHURCH, VA

BANK

JAN 31 2014

EXAMINER

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. BAMBALZO, L.P.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

2014 JAN 30 PM 8:51

Certificate of Limited Partnership
For
Florida Limited Partnership

ARTICLE 1 – Name:

The name of the Limited Partnership is BAMBRAL20, L.P.

ARTICLE 2 – Address:

The mailing address and street address of the initial designated office of the Limited Partnership is:

495 Grand Blvd, Suite 206
Miramar Beach, FL 32550

ARTICLE 3 – Registered Agent, Registered Office and Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Robert A. Durham
495 Grand Blvd, Suite 206
Miramar Beach, FL 32550

ARTICLE 4 – Acceptance by Registered Agent

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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Registered Agent's Signature

ARTICLE 5

The limited partnership does not elect to be a limited liability limited partnership.

ARTICLE 6 – General Partners

The name and business address of each General Partner is as follows:

Name:

Business Address

Chad Barrett

**495 Grand Blvd, Suite 206
Miramar Beach, FL 32550**

2014 JUN 30 PM 6:51
FALLA 381

Jason Rutland

**112 Brockwood Drive
Vicksburg, MS 39180**

Ric Speights

**4240 Indigo Place
Lake Charles, LA 70605**

ARTICLE 7 – Effective Date

The effective date of this Certificate shall be the date of filing.

Signed this 27th day of January 2014.

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.


Chad Barrett


Jason Rutland


Ric Speights

2014 Jan 30 PM 5:51
FILED 10381110000