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FILED

FEB - 6 2013
T. HAMPTON

COVER LETTER

TO: **Registration Section Division of Corporations** Ventura Properties Family 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: Ana R. Mayer Contact Person Firm/Company 1200 Mockingbird Road Address Key Largo, Florida 33037 City, State and Zip Code kennethwarnerlaw@qmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 240-1077 Ana R. Mayer Name of Contact Person Area Code and Daytime Telephone Number Enclosed is a check for the following amount: \$1,052.50 Filing Fees \$1,000.00 Filing Fees \$1,008.75 Filing Fees \$1,061.25 Filing Fees, (\$965 Filing Fee and and Certificate of and Certified Copy Certified Copy, and \$35 Registered Agent Certificate of Status Status Fee) STREET ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

CR2E030 (01/06)

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

Acc	(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) ceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. ceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. LLLP.				
· .					
2.	1200 Mockingbird Road				
_	(Street address of initial designated office)				
	Key Largo, FL 33037				
3.	Kenneth Warner, Esq.				
_	(Name of Registered Agent for Service of Process)				
4.	2828 Coral Way, Suite 440				
	(Florida street address for Registered Agent)				
	Miami, FL 33145				
con	I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to apply with the provisions of all statutes relative to the proper and complete performance of my duties, at I am familiar with and accept the obligations of my position as registered agent. Signature of Registered Agent				
6	1200 Mockingbird Road				
	(Mailing address of initial designated office)				

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Name:	Business Address:
Ana R. Mayer	1200 Mockingbird Road
	Key Largo, FL 33037
Effective date, if other than the date	of filing:
	o nor more than 90 days after the date the document is
filed by the Florida Department	of State)
Signed this da	ay of February , 2014.
	r: I/We submit this document and affirm that the facts
stated herein are true. I/We am/a	re aware that any false information submitted in a
s.817,155, F.S.	State constitutes a third degree felony as provided for in
Drak Mas	4.FEB
ANA R. MAYER	702 1
	· SS 5
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Filing Foos	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Filing Fees: Certified Copy (optional):	\$52.50 \$52.50
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Page 2 of 2