

A14 0000000081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

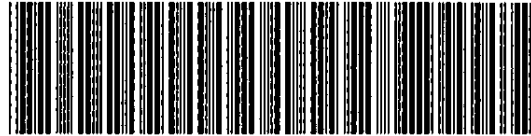
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300256236013

02/07/14--01017--021 **1008.75

2014 FEB - 7 AM 10:40
SECRETARY OF STATE
MAIL ROOM

FEB 10 2014

T CLINE

kenneth a. wenzel, p.a.
kwenzel@hnrwlaw.com
d - 561.862.4118
f - 561.862.4966

February 6, 2014

Via UPS Next Day Delivery
Registration Section
Florida Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: MURDOCK'S RETREAT, LP, a Florida Limited partnership
Our File No. mu051414.01

Ladies and Gentlemen:

With reference to the above captioned entity, included are the following items:

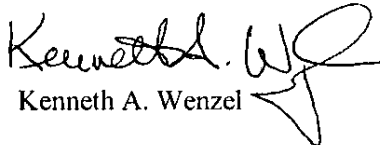
1. Signed Certificate of Limited Partnership for Florida Limited Partnership.
2. Firm Trust Account Check in the amount of \$1,008.75 which represents the Filing Fees for the enclosed Certificate and a Certificate of Status.

Please file the Certificate upon receipt and return evidence of the filing and the Certificate of Status to the undersigned as soon as possible.

If you have any questions regarding this filing, please do not hesitate to contact me. Thank you.

Very Truly Yours,

Hankins Northwood Roman Wenzel P.L.


Kenneth A. Wenzel

FILED
2014 FEB -7 AM 10:40
FEB 7 2014
FEB 7 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MURDOCK'S RETREAT, LP

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:

KENNETH A. WENZEL

Contact Person

HANKINS NORTHWOOD ROMAN WENZEL P.L.

Firm/Company

1800 N. MILITARY TRAIL, SUITE 160

Address

BOCA RATON, FLORIDA 33431

City, State and Zip Code

KWENZEL@HNRWLAW.COM

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

For further information concerning this matter, please call:

KENNETH A. WENZEL at (561) 862-4118

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

CR2E030 (01/06)

2014 FEB -7 AM 10:40
FILED

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

1. MURDOCK'S RETREAT, LP

(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. c/o HANKINS NORTHWOOD ROMAN WENZEL P.L.

(Street address of initial designated office)

1800 N. MILITARY TRAIL, SUITE 160, BOCA RATON, FLORIDA 33431

3. HANKINS NORTHWOOD ROMAN WENZEL P.L.

(Name of Registered Agent for Service of Process)

4. 1800 N. MILITARY TRAIL, SUITE 160, BOCA RATON, FLORIDA 33431

(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.*

Kenneth A. Wenzel Manager

Signature of Registered Agent

6. C/O HANKINS NORTHWOOD ROMAN WENZEL P.L.

(Mailing address of initial designated office)

1800 N. MILITARY TRAIL, SUITE 160, BOCA RATON, FLORIDA 33431

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

8. Name and business address of each general partner:

Name:

Business Address:

INDIAN BAYOU INVESTMENTS, INC.

c/o Hankins Northwood Roman Wenzel P.L.

PI4-8974

1800 N. Military Trail, Suite 160

Boca Raton, Florida 33431

9. Effective date, if other than the date of filing: Filing Date

(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 4th day of February, 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.

INDIAN BAYOU INVESTMENTS, INC.

BY: Colleen Christensen

Colleen Christensen, President

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

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

\$52.50

\$8.75

Page 2 of 2

2014 FEB - 7 AM 10:48

FILED