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K. SALY EXAMINER MAR 1 4 2014 Osborne & Osborne

PROFESSIONAL ASSOCIATION
ATTORNEYS AT LAW
798 SOUTH FEDERAL HIGHWAY
BOCA RATON, FLORIDA 33432-6114

POST OFFICE DRAWER 40 BOCA RATON, FLORIDA 33429-9974

TELEPHONE: 561/395-1000 FAX: 561/368-6930

E-MAIL: rim2@osbornepa.com

ROBERT I. MacLAREN, II Board Certified - Real Estate

March 10, 2014

## Via Federal Express

Registration Section
Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re:

Our File No. 13-25983

Klemann, Ltd., a Florida limited partnership

## Dear Sir/Madam:

In regard to the above captioned matter, enclosed herein are the following:

- 1. CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP.
- Osborne & Osborne, P.A. Client Account Check Number 5458 in the amount of One Thousand Eight and 75/100 (\$1,008.75) U.S. Dollars payable to the order of Florida Department of State drawn upon Wells Fargo Bank, N.A.

for your review, the appropriate action, and the completion of your file. Item 1 above is provided for filing in the appropriate records of the Registration Section of the Division of Corporations. Item 2 above is provided in order to satisfy the filing fee and to provide a Certificate of Status in regard to Klemann, Ltd., a Florida limited partnership.

Please return all correspondence concerning this matter to the undersigned at the address above. For further information concerning this matter, please contact the undersigned at the telephone number set forth above.

Registration Section March 10, 2014 Page 2

Thank you in advance for your courtesy and cooperation in regard to this matter. Do not hesitate to contact us should you have any questions concerning any aspect of this matter. We look forward to hearing from you in the very near future.

Best regards.

Very truly yours,

Robert I. MacLaren II

RIM:cr Enclosures

cc: Maureen H. Kennon

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## CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP

FILED
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1.	Name

يبدروا ستؤري

Klemann, Ltd., a Florida limited partnershipy of STATE

- 2. Street Address of Initial Designated Office
- 3 Osprey Court, Ocean Ridge, Florida 33435
- 3. Name of Registered Agent for Service of Process

Robert I. MacLaren II

4. Florida Street Address for Registered Agent

Suite 100 - 798 South Federal Highway Boca Raton, Florida 33432

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
- 3 Osprey Court, Ocean Ridge, Florida 33435
- 7. Name of each general partner

Catomarwill, L.L.C., a Florida limited partnership

- 8. Business address of general partner
- 3 Osprey Court, Ocean Ridge, Florida 33435

9. Effective Date

Date of filing

Signed this 11th day of March, 2014.

Signature of each general partner: I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Florida Statutes §817.155.

Catomarwill, L.L.C., a Florida

y: Robert I. MacLaren II Authorized Agent

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