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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

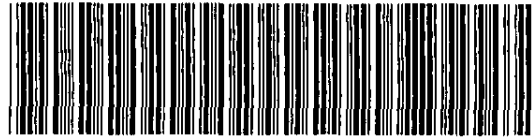
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Certified Copies _____

Certificates of Status _____

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INC.**

"When you need ACCESS to the world"

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WALK IN

PICK UP: 3/28 GLWA

- ☐ CERTIFIED COPY _____
- ☒ PHOTOCOPY _____
- ☒ CUS GS _____
- ☒ FILING LLLP _____

1. GAN MAC PROPERTIES, LLLP
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GanMac Properties, LLLP

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:

Charlotte C. Stone, Esquire

Contact Person

Stone Law Group, P.L.

Firm/Company

3200 US Highway 27 S., Suite 307

Address

Sebring, Florida 33870

City, State and Zip Code

charlotte@stonelawgroupfl.com

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

For further information concerning this matter, please call:

Charlotte C. Stone

Name of Contact Person

at (863) 402-5424

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$1,000.00 Filing Fees
(\$965 Filing Fee and
\$35 Registered Agent
Fee) | <input checked="" type="checkbox"/> \$1,008.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$1,052.50 Filing Fees
and Certified Copy | <input type="checkbox"/> \$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

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TALLAHASSEE, FL

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

1. GanMac Properties, LLLP

(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. 424 E. Central Blvd. #188

(Street address of initial designated office)

Orlando, Florida 32801

3. Charlotte C. Stone

(Name of Registered Agent for Service of Process)

4. 3200 US Highway 27 S., Suite 307

(Florida street address for Registered Agent)

Sebring, Florida 33870

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.*

Charlotte C. Stone

Signature of Registered Agent

6. 62 Forestview Way

(Mailing address of initial designated office)

Beaver Bank, NS B4G 1G2 Canada

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:

3265519 Nova Scotia Limited, Inc.

424 E. Central Blvd. #188

FI4-1405

Orlando, FL 32801

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 26 day of March, 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.

3265519 Nova Scotia Limited, Inc.

By: Tammy Gannon
Tammy Gannon, Director

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

SECRETARY OF STATE
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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