Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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TO:		Table 1
	Division of Corporations	9.00
	Fax Number : (850)617-6383	
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From:		2 (c)
	Account Name : C T CORPORATION SYSTEM	F (
	Account Number : FCA00000023	Ω.∷ €
	Phone (850) 222-1092	and it are
	Fax Number : (950)878-5358	司用 :5

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:				

FLORIDA/FOREIGN LP/LLLP AVILA DEVELOPERS FUNDING, L.P.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,000.00

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7/8/2014

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COVER	LETTER
TO: Registration Section Division of Corporations	
SUBJECT: Aviia Developers Fundii Name of Florida Limited Part	ng, L.P. mership or Limited Liability Limited Partnership
The enclosed Certificate of Limited Partner	ship and fees are submitted for filing.
Please return all correspondence concerning	this matter to:
Osvaldo F. Torres, Esq.	
Contact Person Torres Law, P.A.	
Firm/Company	
888 Southeast 3rd Avenue, Suit	e 400
Address	
Fort Lauderdale, Florida 33316	
City, State and Zip Code	
ozzie@torreslaw.net E-mail address: (to be used for future annual re	port notification)
For further information concerning this matt	
Osvaldo F. Torres, Esq.	at (754) 300-5815 Area Code and Daytime Telephone Number
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amour	nt:
\$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 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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CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

1. Avila Developers Funding, L.P.	······································
(Name of Limited Partnership or Limited Liability Limited Partnership, which must Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Lie Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Liability Limited Partnership suffixes: Limited Liability	4
2. 7680 Universal Boulevard, Suite 100	
(Street address of initial designated office)	34.6 . 3
Orlando, Florida 32819	
3. Torres Law, P.A.	
(Name of Registered Agent for Service of Process)	
4,888 Southeast 3rd Avenue, Suite 400	
(Plorida street address for Registered Agent)	
Fort Lauderdale, Florida 33316	
5. I hereby accept the appointment as registered agent and agree to act in this capacity comply with the provisions of all statutes relative to the proper and complete performant and I am familiar with and accept the chiliquities of my position as registered agent, Signature of Registered Agent	
6,12004 Modena Lane	
(Mailing address of initial designated office)	
Orlando, Florida 32827	
7. If limited partnership elects to be a limited liability limited partnership	o, check box

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Camille Asmar	7680 Universal Boulevard, Suite 100
	Orlando, Florida 32819
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9. Effective date, if other than the date of i	
(Effective date cannot be prior to no filed by the Florida Department of L	r more than 90 days after the date the document is tate.)
	0044
Signed this 8 day o	<u>July , 2014</u>
stated herein are true. I/We am/are	We submit this document and affirm that the facts were that any false information submitted in a constitutes a third degree felony as provided for in
Signature of each general partner: Is stated herein are true. I/We am/are	We submit this document and affirm that the facts ware that any false information submitted in a