

Oct. 15. 2014 1:15 PM
10/15/2014

Gray Robinson

Division of Corporations

No. 1999 P. 1

A1400000549

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To:

Division of Corporations
Fax Number : (850)617-6383

From: Carrie Ramos, Paralegal please fax confirmation to 407 244-5699

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Account Number : I20010000078
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DIVISION OF CORPORATIONS
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INFORMATION SERVICES

FLORIDA/FOREIGN LP/LLLP

Independence Retail North, LLLP

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

OCT 16 2014
J. BRUCE

H14000241768 3

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

1. Independence Retail North, LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P. or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

2. 600 East Colonial Drive, Suite 100

(Street address of initial designated office)

Orlando, Florida 32803

3. J. Steven Schrimsher

(name of Registered Agent for Service of Process)

4. 600 East Colonial Drive, Suite 100

(Florida street address for Registered Agent)

Orlando, Florida 32803

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 am familiar with and accept the obligations of my position as registered agent.*



Signature of Registered Agent

6. 600 East Colonial Drive, Suite 100

(Mailing address of initial designated office)

Orlando, Florida 32803

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



H14000241768 3

H14000241768 3

8. Name and address of each general partner:

Name:

Business Address:

Schrimsher Commercial, Inc.

600 East Colonial Drive, Suite 100
Orlando, Florida 32803

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 13th day of October, 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.

SCHRIMSHER COMMERCIAL, INC.,
a Florida corporation

By: _____

J. Steven Schrimsher, 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

H14000241768 3