

A150000000214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

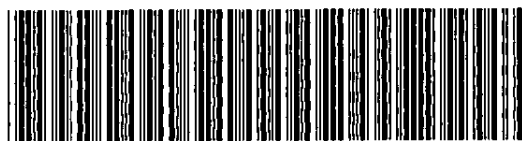
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100267692231

03/30/15--01006--005 \*\*1000.00

RECEIVED  
DEPARTMENT OF STATE  
15 MAR 27 AM 8:56

FILED  
15 MAR 27 AM 10:06  
M. MILLIGAN  
EXAMINER

MAR 31 2015

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Moore Cape Coral Properties, LP

Signature \_\_\_\_\_

Requested by: Seth

03/27/15

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

RECEIVED  
DEPARTMENT OF STATE  
15 MAR 27 AM 8:54

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Moore Cape Coral Properties, 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:

Charles B. Capps, Esq.

Contact Person

Pavese Law Firm

Firm/Company

1833 Hendry Street

Address

Fort Myers, Florida 33901

City, State and Zip Code

dave.m@agri-turf.ca

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

For further information concerning this matter, please call:

Charles B. Capps

at ( 239 )

336-6219

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)

FILED  
15 MAR 27 AM 10:09  
TALLAHASSEE, FL 32314

March 27, 2015

Florida Department of State  
Division of Corporations  
P.O. Box 6250  
Tallahassee, FL 32314

I, David Moore, member of Moore Cape Coral Properties, LLC do not object to Moore Cape Coral Properties, LP to be formed with the same name.

  
David Moore

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

FILED  
MAR 21 AM 10:09  
CLERK OF CIRCUIT COURT  
IN AND FOR THE STATE OF FLORIDA  
TALLAHASSEE

1. Moore Cape Coral Properties, 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. 10 Eagle Nest Court

(Street address of initial designated office)

Calendon, Ontario, Canada L7E OB4

3. Charles B. Capps, Esq.

(Name of Registered Agent for Service of Process)

4. 1833 Hendry Street

(Florida street address for Registered Agent)

Fort Myers, Florida 33901

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. 10 Eagle Nest Court, Calendon, Ontario, Canada L7E OB4

(Mailing address of initial designated office)

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:

Moore Cape Coral Properties, LLC

10 Eagle Nest Court

Calendon, Ontario, Canada L7E OB4

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15  
MAR 27 AM 10:09  
FILED  
CLERK OF THE COURT  
STATE OF FLORIDA

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 26th day of March, 2015.

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.

Paul Moore.

as member of Moore Cape Coral Properties, LLC, General Partner

**Filing Fees:**

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

**Certified Copy (optional):**

**\$52.50**

**Certificate of Status (optional):**

**\$8.75**