

2015/12/16 15:29:33 3 /4

Page 1 of 2

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000297063 3)))



H150002970633ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : AKERMAN LLP - ORLANDO
Account Number : 076656002425
Phone : (407) 423-4000
Fax Number : (407) 843-6610

FILED
15 DEC 16 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: abramsl@berdarmgt.com

FLORIDA/FOREIGN LP/LLLP
B.B.B. Plaza Outparcel Associates, Ltd.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$1,000.00

DEC 17 2015

S. YOUNG

RECEIVED
15 DEC 16 PM 4:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

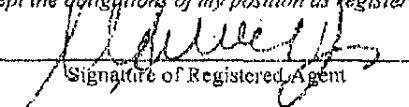
Electronic Filing Menu

Corporate Filing Menu

Help

HIS000297063 3

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR A
FLORIDA
LIMITED PARTNERSHIP**

1. B.B.B. Plaza Outparcel Associates, Ltd.
(Name of Limited Partnership)
 2. 3500 Flamingo Drive, Miami Beach, Florida 33140
(Street address of initial designated office)
 3. Michael Kanoff
(Name of Registered Agent for Service of Process)
 4. 3500 Flamingo Drive, Miami Beach, Florida 33140
(Florida street address for Registered Agent)
 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. 3500 Flamingo Drive, Miami Beach, Florida 33140
(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:

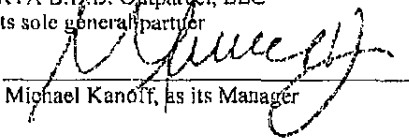
<u>Name:</u>	<u>Business Address:</u>
B.B.B. Plaza Outparcel GP, Ltd.	<u>3500 Flamingo Drive, Miami Beach, Florida 33140</u>
 9. Effective date, if other than the date of filing: [N/A].
- Signed this 16th day of December, 2015.

Signature of the sole 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 s.817.155, F.S.

General Partner: B.B.B. Plaza Outparcel GP, Ltd.

By: BERTA B.B.B. Outparcel, LLC
as its sole general partner

By: 
Michael Kanoff, as its Manager

FILED
15 DEC 16 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HIS000297063 3