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(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lockwood Ridge Land, 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:

Donald J. Harrell, Esq.

Contact Person

Burgess, Harrell, Mancuso, Colton & La Porta, P.A.

Firm/Company

1776 Ringling Blvd.

Address

Sarasota, FL 34236

City, State and Zip Code

dharrell@burgessharrell.com

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

For further information concerning this matter, please call:

Patrick Rosenbaum at (941) 366-3700

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)

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

1. Lockwood Ridge Land, 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. 3100 Steeles Ave. East, Suite 603

(Street address of initial designated office)

Markham, Ontario , Canada L3R 8T3

3. Donald J. Harrell, Esq.

(Name of Registered Agent for Service of Process)

4. 1776 Ringling Blvd.

(Florida street address for Registered Agent)

Sarasota, FL 34236

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. 3100 Steeles Ave. East, Suite 603

(Mailing address of initial designated office)

Markham, Ontario , Canada L3R 8T3

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

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8. Name and business address of each general partner:

Name:

Business Address:

Lockwood Ridge GP, LLC

3100 Steeles Ave. East, Suite 603

L1600009441

Markham, Ontario

Canada L3R 8T3

9. Effective date, if other than the date of filing: 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 21st day of March, 2016.

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.

Stephen Chan, Manager of General Partner

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

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

\$52.50

\$8.75

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