

AI6000000184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

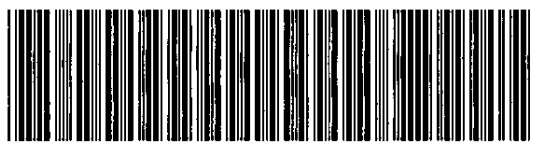
(Document Number)

Certified Copies _____ Certificates of Status _____

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02/16/16--01011--015 **1061.25

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2016 APR -5 PM 12:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

[Handwritten Signature] 4/5/16

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HIGHLANDS MIAMI EB5 LLLP

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:

ARTURO VENTI

Contact Person

BECOME AMERICAN INVESTOR, LLC

Firm/Company

320 S FLAMINGO RD # 192

Address

PEMBROKE PINES, FLORIDA 33027

City, State and Zip Code

highlandsmiamieb5@gmail.com

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

For further information concerning this matter, please call:

ARTURO VENTI

Name of Contact Person

at (305) 3305299

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 23, 2016

BECOME AMERICAN INVESTOR, LLC (DE)
ATTN: ARTURO VENTI
320 S. FLAMINGO RD, #192
PEMBROKE PINES, FL 33027

SUBJECT: HIGHLANDS MIAMI EB5 LLLP
Ref. Number: W16000013346

We have received your document for HIGHLANDS MIAMI EB5 LLLP and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan
Senior Section Administrator

Letter Number: 016A00003720

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

FILED
2016 APR -5 PM 12:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. HIGHLANDS MIAMI EB5 LLLP

(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. 320 S FLAMINGO RD. # 192

(Street address of initial designated office)

PEMBROKE PINES, FLORIDA, 33027

3. BECOME AMERICAN INVESTOR LLC

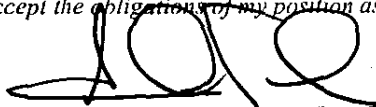
(Name of Registered Agent for Service of Process)

4. 320 S FLAMINGO RD. # 192

(Florida street address for Registered Agent)

PEMBROKE PINES, FLORIDA, 33027

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. 320 S FLAMINGO RD. # 192

(Mailing address of initial designated office)

PEMBROKE PINES, FLORIDA, 33027

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:

BECOME AMERICAN INVESTOR LLC

The Corporation Trust Company

1209 Orange Street

Wilmington DE 1981

County of New Castle

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TALLAHASSEE 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 ARTURO VENTURA day of FEBRUARY 5th, 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.

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75