

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

From: Account Name : SHUTTS & BOWEN, LLP
Account Number : 076447000313
Phone : (305) 358-6300
Fax Number : (305) 347-7750

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

Email Address:

gcohen@shutts.com

FLORIDA/FOREIGN LP/LLLP
LAKE DELRAY APARTMENTS, LLLP

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$1,061.25

2016 MAY 31 AM 11:40

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16 MAY 31 PM 3:35
CLERK OF STATE
TALLAHASSEE, FLORIDA

H16000132739 3

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

1. LAKE DELRAY APARTMENTS, 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. 701 SE 6TH AVENUE #201
(Street address of initial designated office)

DELRAY BEACH, FL 33483

3. DOROTHY ELLINGTON
(Name of Registered Agent for Service of Process)

4. 701 SE 6TH AVENUE #201
(Florida street address for Registered Agent)

DELRAY BEACH, FL 33483

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.

By:  Dorothy Ellington
Signature of Registered Agent

6. 701 SE 6TH AVENUE #201
(Mailing address of initial designated office)

DELRAY BEACH, FL 33483

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

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H16000132739 3

8. Name and business address of each general partner:

Name:Business Address:DELRAY HOUSING GROUP, INC.701 SE 6TH AVENUE #201DELRAY BEACH, FL 334839. Effective date, if other than the date of filing: Upon 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 27th day of May, 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.

DELRAY HOUSING GROUP, INC.ByDorothy Ellington, President**Filing Fees:****\$1,000.00** (\$965 Filing Fee and \$35 Registered Agent Fee)**Certified Copy (optional):****\$52.50****Certificate of Status (optional):****\$8.75**

Page 2 of 2

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TALLAHASSEE, FLORIDA

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