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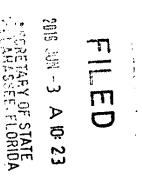
(Re	equestor's Name)	<del>.</del>
(Address)		
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PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of Status	
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### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Blair Consular Services 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 m	atter to:
Michael J. Heath	· .
Contact Person	<u>,</u>
Law Offices of Michael J. Heath PA	H. Western C. C.
Firm/Company	
167 108th Avenue	
Address	
Treasure Island, FL 33706	
City, State and Zip Code	<del></del>
dougb@blairconsular.co.uk  B-mail address: (to be used for future annual report note)	fication)
For further information concerning this matter, plea	ase call:
Michael Heath at (72	27 360-2771
	ea.Code and Daytime Telephone Number
Enclosed is a check for the following amount:	ing the state of
	52.50 Filing Fees Certified Copy  S1,061.25 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

## Blair Consular Services 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.

## 2 612 Gulf Blvd. #204-B

(Street address of initial designated office)

Indian Rocks Beach, FL 33785

3. Law Offices of Michael J. Heath, PA

(Name of Registered Agent for Service of Process)

4167 108th Avenue

(Florida street address for Registered Agent)

Treasure Island, FL 33706

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

6.612 Gulf Blvd. #240-B

(Mailing address of initial designated office)

Indian Rocks Beach, FL 33785

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

Page 1 of 2

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8. Name and business address of ea	nch general partner. Business Address.
Doug Blair	612 Gulf Blvd. #204-B
	Indian Rocks Beach, FL 33785
Heather Blair	612 Gulf Blvd. #204-B
	Indian Rocks Beach, FL 33785
no jedina se politika jedina.	
9. Effective date, if other than the date of f	filing:
	or more than 90 days after the date the document is.
Signature of each general partner: I/ stated herein are true. I/We am/are a	We submit this document and affirm that the facts aware that any false information submitted in a e-constitutes a third-degree felony as provided for in
1.040/	SIGNEERS
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75 Page 2 of 2