## A16000000379

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 8, 2016

MANSOUR MAX SABETI 128 COLONIAL DR ORLANDO, FL 32801 US

SUBJECT: SEDONA DEVELLOPMENT LLLP

Ref. Number: W16000054723

We have received your document for SEDONA DEVELLOPMENT 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):

The registered agent must sign accepting the designation.

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.

Letter Number: 416A00016649

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Sedona Development LLLP		
	Partnership or Limited Liability Limited Partnership	
The enclosed Certificate of Limited Part	nership and fees are submitted for filing.	
Please return all correspondence concern	ning this matter to:	
Mansour Max Sabeti		
Contact Person		
Firm/Company		
128 E. Colonial Dr. Orlando, FL 32801		
Address		
Orlando, FL 32801		
City, State and Zip Code		
MaxSabeti@gmail.com		
E-mail address: (to be used for future annua	al report notification)	
For further information concerning this r	natter, please call:	
Max Sabeti	at ( 407 ) 468-8972	
Name of Contact Person	Area Code and Daytime Telephone Number	
Enclosed is a check for the following am	ount:	
\$1,000.00 Filing Fees \$1,008.75 Filing Fe and \$35 Registered Agent Fee)  \$1,008.75 Filing Fee and Certificate of Status	and Certified Copy  Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P. O. Box 6327	
2661 Executive Center Circle	Tallahassee, FL 32314	
Tallahassee, FL 32301		

CR2E030 (01/06)

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

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) exceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. exceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. LLLP.		
128 E. Colonial Dr. Orlando, FL 32801		
(Street address of initial designated office)		
Mansour Max Sabeti		
(Name of Registered Agent for Service of Process)		
128 E. Colonial Dr. Orlando, FL 32801	3₹.	
(Florida street address for Registered Agent)		
I hereby accept the appointment as registered agent and agree to act in this a mply with the provisions of all statutes relative to the proper and complete pay at I am familiar with and accept the obligations of my position as registered ag	formatice of my auries, -	
Signature of Registered Agant		
128 E. Colonial Dr. Orlando, FL 32801		
(Mailing address of initial designated office)		

<ol><li>Name and business address of each gen Name:</li></ol>	eral partner: Business Address:
Mansour Max Sabeti	128 E. Colonial Dr. Orlando, FL 32801
	Orlando, FL 32801
	,~.
	16 A
	(2000年) (2000年) (2000年) (2000年)
Effective date, if other than the date of filing:	
	than 90 days after the date the document is
Signed this 2nd day of Augu	ust ,2016
Signature of each general partner:	
MANSITA MAX SAHETI	
Filing Fees: \$1,00	00.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional): \$52.5	