

A160000000460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

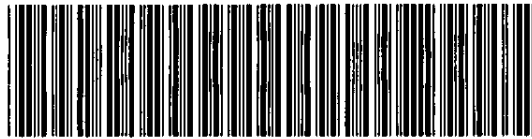
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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RECEIVED  
DEPARTMENT OF STATE

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 283024 12000A

AUTHORIZATION :

*Lyndee Coleman*

COST LIMIT : \$1,000.00

ORDER DATE : September 7, 2016

ORDER TIME : 3:42 PM

ORDER NO. : 283024-005

CUSTOMER NO: 12000A

DOMESTIC FILING

NAME: BROCK PGA HOTEL, LLLP

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
XX CERTIFICATE OF LIMITED PARTNERSHIP  
ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS: \_\_\_\_\_

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

1. Brock PGA Hotel, 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. 4650 Donald Ross Road, Suite 200

(Street address of initial designated office)

Palm Beach Gardens, FL 33418

3. Peter Brock

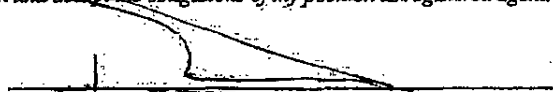
(Name of Registered Agent for Service of Process)

4. 4650 Donald Ross Road, Suite 200

(Florida street address for Registered Agent)

Palm Beach Gardens, FL 33418

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. 4650 Donald Ross Road, Suite 200

(Mailing address of initial designated office)

Palm Beach Gardens, FL 33418

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

8. Name and business address of each general partner:

Name: LI0000023303

Business Address:

Brock PGA Hotel GP, LLC

4650 Donald Ross Road, Suite 200

Palm Beach Gardens, FL 33418

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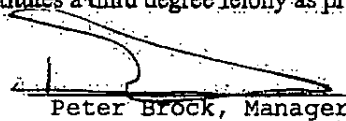
9. Effective date, if other than the date of filing:

*(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 2nd day of September, 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.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

  
Peter Brock, Manager

\_\_\_\_\_  
\_\_\_\_\_

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

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

\$52.50

\$8.75

16 SEP - 7 AM 5:34  
STATE OF FLORIDA  
TALLAHASSEE