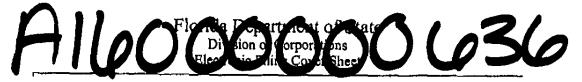
Division of Corporations

Page 1 of 1

5

Ģ

cn Cn



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000278598 3)))



H180002765883ABCD

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tor

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH,
Account Number : 076077001702

Phone : (407)841-1200 Fax Number 1 (407) 423-1831

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

Email Address: roger.yates@gmail.com

FLORIDA/FOREIGN LP/LLLP OAK RIDGE ENTERPRISES, LP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$1,052.50

Electronic Filing Menu

Corporate Filing Menu

Help

850-617-6381

11/14/2018 10:17:47 AM PAGE 1/001 Fax Server



November 14, 2016

FLORIDA DEPARTMENT OF STATE

DEAN MEAD EGERTON BLOODWORTH CAPOUANO E BOZARTH, PA

SUBJECT: OAK RIDGE, LP

REF: W16000076704

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

The document number of the name conflict is P98000086010.

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 filling of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H16000278598 Letter Number: 816A00024297 (((H16000278598 3)))

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) 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. 14908 Wase Way, Fort Myers, FL 33905				
			(Street address of initial designated office)	
			3. J. Roger Yates	
(Name of Registered Agent for Service of Process)				
4, 14908 Wise Way, Fort Myers, FL 33905				
(Florida street address for Registered Agent)				
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.				
Sik Water				
Signature of Registered Agent				
6, 14908 Wise Way, Fort Myers, FL 33905				
(Mailing address of initial designated office)				
7. If limited partnership elects to be a limited liability limited partnership, check box				

Page 1 of 2

(((H16000278598 3)))

8. Name and business address of ea Name: LISOOO0858 Yates Group USA, LLC	- ·
, , , , , , , , , , , , , , , , , , , ,	Fort Myers, FL 33905
). Effective dote, if other than the date of t	Rling:
Effective date cannot be prior to re lied by the Florida Department of !	or more than 90 days after the date the document is State.)
Signed thisday o	of Navenber 2018
trated herein are true. I/We am/are a locument to the Department of State 817 135 188	We submit this document and affirm that the facts aware that any false information submitted in a constitutes a third degree felony as provided for in
Somme fortan	hy file
filing Fees: Certified Copy (optional): Certificate of Status (optional);	\$1,000.00 (\$965 Piling Fee and \$35 Registered Agent Fee) \$52,50 \$8.75 Page 2 of 2