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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006 Phone : (407)425-7010

Fax Number : (407)425-2747

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

Email Address: ilagmay @ Wendover group. com

FLORIDA/FOREIGN LP/LLLP

Linton Commons, Ltd.

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## COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT: LINTON COMMONS, LT	TD
Name of Florida Limited Parts	nership or Limited Liability Limited Partnership
The enclosed Certificate of Limited Partners	hip and fees are submitted for filing.
Please return all correspondence concerning	this matter to:
N. Dwayne Gray, Jr., Esq.	
Zimmerman Kiser Sutcliffe, P.A. Firm/Company	
315 E. Robinson Street, Suite 60	<u> </u>
Address	
Orlando, FL 32801  City, State and Zip Code	
ilagmay@wendovergroup.com E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matt	er, please call:
Amy Jellicorse	<sub>et (</sub> 407 ) 425-7010
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amoun	at:
\$1,000.00 Filing Fees S1,008.75 Filing Fees and S35 Registered Agent Status	\$1,052.50 Filing Fees and Certified Copy Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
CR1E030 (01/06)	• •

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

1_LINTON COMMONS, LTD.	
(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, 2602 Merida Lane	
(Street address of initial designated office)	
Tampa, FL 33618	
3. N. Dwayne Gray, Jr., Esq.	
(Name of Registered Agent for Service of Process)	
4.315 E. Robinson Street, Suite 600	Q
(Florida street address for Registered Agent)	Jaŭ 🐧
Orlando, FL 32801	
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	1 44 8:49
6.2602 Merida Lane	
(Mailing address of initial designated office)	
Tampa, FL 33618	
7. If limited partnership elects to be a limited liability limited partnership, check box	

Page 1 of 2

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<ol> <li>Name and business address of each gen <u>Name:</u></li> </ol>	eral parmer: Business Address:
Linton Commons GP, LLC	2602 Merida Lane
	Tampa, FL 33618
9. Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor mor filed by the Florida Department of State.)	e than 90 days after the date the document is co
Signed this 28+4 day of 1	November, 2017
Signature of each general partner: I/We su stated herein are true. I/We am/are aware t	bmit this document and affirm that the facts
Linton Commons GP, LLC, a Florida lim	ited liability company
By: James E. Dyal, Manager	An E. Syal
Certified Copy (optional): \$52 Certificate of Status (optional): \$3.7	