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ARMANDO A. PEREZ, ESQ.

Attorneys and Counselors at Law Dadeland Square Office Tower 7700 N. Kendall Dr., Suite 606 Miami, Florida 33156 Telephone: (305) 630-3838 Fax: (305) 630-3839 E-mail: service@aperezesq.com www.aperezesq.com

May 1, 2018

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Our client: The Junior A. Hernandez Family Limited

Partnership

Dear Sir/Madam:

Enclosed please find the Certificate of Limited Partnership of The Junior A. Hernandez Family Limited Partnership, and our check for \$1,000.00 to cover the \$965.00 filing fee, and \$35.00 Registered Agent Fee.

If any additional information, monies and/or documentation is required please call this office collect to expedite this matter.

Your anticipated cooperation is most appreciated.

Sincerely,

Armando A. Perez, Esq.

AAP/mbd Enclosure

CERTIFICATE OF LIMITED PARTNERSHIP 18 FOR FLORIDA LIMITED PARTNERSHIP

OR LIMITED LIABILITY LIMITED PARTNERSHIP

_	THE JUNIOR A. HERNANDEZ FAMILY LIMITED PARTNERSHIP
1.	(Name of Limited Partnership or Limited Liability 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.	15015 S.W. 26th Terrace, Miami, FL 33185 (Street address of initial designated office)
3.	JUNIOR A. HERNANDEZ (Name of Registered Agent for Service of Process)
4.	15015 S.W. 26th Terrace, Miami, FL 33185 (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.
	Signature of Registered Agent
6.	15015 S.W. 26th Terrace, Miami, FL 33185 (Mailing Address of initial designated office)

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

8. Name and business address of each general partner:

Name:

Business Address:

JUNIOR A. HERNANDEZ

15015 S.W. 26th Terrace Miami, FL 33185 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 10th day of April , 2018

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 F.S. 817.155.

JUNIOR A HERNANDEZ, General Partner

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