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		Prom: Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR I READ, Pro- Account Number : 073720000036 Phone : (407)843-4600 Fax Thumbur : (407)843-4444 Alton TXING Pax Stary
		**Enter the email address for this businees entity to be used for future annual report mailings. Enter only one email address please.**
		Erail Address: Vivian Strichmet
		FLORIDA/FOREIGN LP/LLLP Beach Lake Commons LLLP
٢_	MUSEP 20 PH 4: 19	Certificate of Status0Certified Copy1Page Count02Estimated Charge\$1,052.50

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

## 1. Beach Lake Commons LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., DP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P., or LLP.

2, 270 W. New England Ave	S	201	
(Street address of initial designated office)	202	S BI	
Winter Park, FL 32789	<u></u>	EP	
	SS	20	
3. Marc Hagle	<u>řn - &lt;</u>	$\mathbf{C}$	
(Name of Registered Agent for Service of Process)		ΔH	
4,270 W. New England Ave.	$\frac{-\sigma}{2}$	ö	$\cup$
(Flurida street address for Registered Agent)	2-	S	
Winter Park, FL 32789			

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 dutles, and I am familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent

6,270 W. New England Ave

(Malling address of initial designated office)

Winter Park, FL 32789

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

Page 1 of 2

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lame:	Business Address:	
leach Lake Commons GP, Inc.	270 W. New England Ave.	
	Winter Park, FL 32789	
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		<u>5</u>
). Effective date, if other than the date of filing:		_
	e than 90 days after the date the document is	
filed by the Florida Department of State.)		
Signed this day of	leptember 2018	
	bmit this document and affirm that the facts	

s.817.155, F.S 0.500

Filing Fees: Certified Copy (optional): Certificate of Status (optional): \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75 Page 2 of 2

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