

A19000000084

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

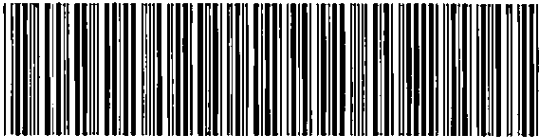
\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

\_\_\_\_\_

Office Use Only



400325148834

FILED  
19 FEB 20 PM 7:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02/21/19--01001--008    \$1072.75

RECEIVED  
19 FEB 20 PM 3:28  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

K. SALY  
FEB 21 2019

# SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 2/20/2019

**\*\*WALK IN\*\***

ENTITY NAME 140 SPENCER LANE LP

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXX \_\_\_\_\_

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED 1,000.00

CHECK # 5793

*Please call Tina at the above number for any issues or concerns. Thank you so much!*

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

FILED  
19 FEB 20 PM 7:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. 140 Spencer Lane L.P.

(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. 552 S US HWY 441

(Street address of initial designated office)

Lady Lake, Florida 32159

3. United Corporate Services, Inc.

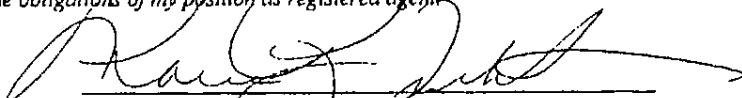
(Name of Registered Agent for Service of Process)

4. 9200 South Dadeland Blvd., Ste. 508

(Florida street address for Registered Agent)

Miami, FL 33156

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. 552 S US HWY 441, Lady Lake, Florida 32159

(Mailing address of initial designated office)

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

FILED  
19 FEB 20 PM 7:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

552 S US HWY 441 LLC

552 S US HWY 441, Lady Lake, Florida 32159

Andrew J. Lubin

552 S US HWY 441, Lady Lake, Florida 32159

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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

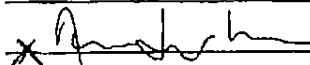
Signed this 19th day of February, 2019

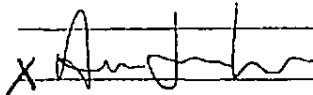
Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Andrew J. Lubin on behalf of

Andrew J. Lubin

552 S US HWY 441 LLC

X 

X 

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75