

2/27/2019

16144554862 From: James Tanks III

A19000009S

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

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FLORIDA/FOREIGN LP/LLLP
Palmetto Leased Housing Associates I, L.L.P

Certificate of Status	0
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4 PAGE FAX

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February 28, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: PALMETTO LEASED HOUSING ASSOCIATES I, LLLP
REF: W19000019883

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.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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

Dionne M Scott
Regulatory Specialist II

FAX Aud. #: H19000067193
Letter Number: 919A00004227

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

1. Palmetto Leased Housing Associates I, LLLP

(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. 2905 Northwest Boulevard, Suite 150, Plymouth MN 55441

(Street address of initial designated office)

3. C.T. Corporation System

(Name of Registered Agent for Service of Process)

4. 1200 South Pine Island Road

(Florida street address for Registered Agent)

Plantation, Florida 33324

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.*

C.T. Corporation System

By: Stephanie Hencz Stephanie Hencz, Assistant Secretary
Signature of Registered Agent

6. 2905 Northwest Boulevard, Suite 150, Plymouth MN 55441

(Mailing address of initial designated office)

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

8. Name and business address of each general partner:

Name:Business Address:

Palmetto Leased Housing Associates I, LLC

2905 Northwest Boulevard, Suite 150

Plymouth MN 55441

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.)

Signed this 27th 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.

Caren C. Metz, Authorized Representative of

Palmetto Leased Housing Associates I, LLC

Its General Partner

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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