Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)617-6383

From: Carrie Ramos, FRP, Paralegal PLEASE FAX CONFIRMATION TO 407 244-5690

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078

Phone : (407)843-8880

Fax Number

; (407)244-5690

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.	•	-
Empil Address, jake@schrimsherproperties.com	たか 3.00 2.00	1

FLORIDA/FOREIGN LP/LLLP Greenbrier at Baytree, LLLP

<u> </u>	
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,000.00

Electronic Filing Menu

Corporate Filing Menu

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

1. Greenbrier at Baytree, LLLP
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P. or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P. or LLLP.
2. 600 East Colonial Drive, Suite 100 (Street address of initial designated office)
Orlando, Florida 32803
3. Jacob M. Schrimsher (name of Registered Agent for Service of Process)
4. 600 East Colonial Drive, Suite 100 (Florida street address for Registered Agent)
Orlando, Florida 32803
5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to act of the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.
Jacob M. Selírimsher
Signature of Registered Agent
Digitalino de Cagnos de Sur de Carrella de
6. 600 East Colonial Drive, Suite 100 (Mailing address of initial designated office)
Orlando, Florida 32803
7. If limited partnership elects to be a limited liability limited partnership, check box

8. Name and address of each general	partner:
Name:	Business Address;
Gideon Commercial, LLC	600 East Colonial Drive, Suite 100 Orlando, Florida 32803
9. Effective date, if other than the date (Effective date cannot be prior to nor Filed by the Florida Department of St.)	more than 90 days after the date the document is
Stated herein are true. I/We am/are a	020. We submit this document and affirm that the facts ware that any false information submitted in a constitutes a third degree felony as provided for in
By: Jacob M. Schrimsher, Member	er
Filing Fees: Certified Copy (optional) Certificate of Status (optional)	\$1,000.00 (\$965 Filling fee and \$35 Registered Agent Fee), \$52.50 \$8.75

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