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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED,

Account Number : 072720000036 : (407)843-4600 Phone

: (407)843-4444 Fax Number

Attn: Tami D. Passley

\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Fmail	Address:	vivian@tricor.net_	

## FLORIDA/FOREIGN LP/LLLP

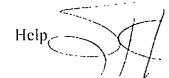
## Minneola Commons LLLP

Certificate of Status	0
Certified Copy	1
Page Count	01
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Note: The general partner Minneola Commons GP, Inc. was also submitted for filing today.

Electronic Filing Menu

Corporate Filing Menu



## CERTIFICATE OF LIMITED PARTNERSHIP OF MINNEOLA COMMONS LLLP

The undersigned, hereby makes and files with the Secretary of State of the State of Florida, this Certificate of Limited Partnership for the purpose of forming a limited liability limited partnership in accordance with the Florida Revised Uniform Limited Partnership Act (2005).

- 1. Name. The name of the limited liability limited partnership is Minneola Commons LLLP (the "Partnership").
- 2. <u>Initial Designated Office</u>. The street and mailing address of the initial designated office of the Partnership is 270 West New England Avenue, Winter Park, Florida 32789.
- 3. Registered Agent. The name of the Partnership's initial registered agent is John D. Ruffier and his street address is 215 N. Eola Drive, Orlando, Florida 32801.
- 4. <u>Name and Business Address of the Sole General Partner</u>. The name of the sole general partner of the Partnership is Minneola Commons GP, Inc., a Florida corporation. The business address of the sole general partner of the Partnership is 270 West New England Avenue, Winter Park, Florida 32789.
- 5. <u>Limited Liability Limited Partnership</u>. The Partnership is a limited liability limited partnership.

IN WITNESS WHEREOF, the undersigned sole general partner of the Partnership has executed this Certificate of Limited Partnership this 8th day of June, 2021.

MINNEOLA COMMONS GP, INC., A PROBLEM OF THE PROBLEM OF THE

## ACCEPTANCE OF REGISTERED AGENT

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.

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John D. Ruffier, Registered Agent