A220000000339

(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.				
69795				

Office Use Only



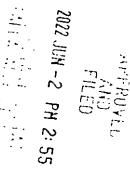
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DIVISION OF CORFORATIONS

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Ficultions Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdraw a) Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitions Name Certificate of Fictitions Name Comp Record Search Officer Search Fictitions Search Fictitions Search Fictitions Owner Search Orling Record Vehicle Search Driving Record Requested by: SETH O6/02 Name Date Time Walk-In Will Pick Up Courier				
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Merger File				Fictitious Name File
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Corp Record Search				Certificate of Status
Officer Search				Certificate of Fictitious Name
Fictitious Search				Corp Record Search
Fictitious Owner Search)	Officer Search
Vehicle Search			1	Fictitious Search
Vehicle Search	Cianatura	- 		Fictitious Owner Search
Courier	Signature			Vehicle Search
Courier				Driving Record
Name Date Time UCC 11 Search UCC 11 Retrieval UCC 11 Retri	Requested by: SETH	0.6402		
Name Date UCC 11 Retrieval Walk-In Will Pick Up Courier				UCC 11 Search
	Name	Date	Time	UCC 11 Retrieval
				Courier

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

artnership suffixes: Limited Pa	r Limited Liability Limited Partnership, which must include suffix) Acceptable Limited artnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership ed Partnership, L.L.L.P. or Lt.L.P.
14318 Romeo Blvd	
	(Street address of initial designated office)
Wimauma, FL 33598	
The Adams Sandler Law (Group, LLC
	(Name of Registered Agent for Service of Process)
37 N. Orange Avenue, Sui	ite 500
	(Florida street address for Registered Agent)
Orlando, FL 32801	
rith the provisions of all stat	intment as registered agent and agree to act in this capacity. I further agree to com utes relative to the proper and complete performance of my duties, and I am familiants of my position as registered agent.
чип апа ассері іле обидано	
un and accept the ootigatio	JBM_
_	Signature of Registered Agent
. 14318 Romeo Blvd	Signature of Registered Agent
_	Signature of Registered Agent (Mailing address of initial designated office)

Page 1 of 2

8. Name and business address of e. Name:	Business Address:	
Apollo Beach RV Resort Manager Inc.	14318 Romeo Blvd	
	Wimauma, FL 33598	
	-	
		
9. Effective date, if other than the effective date cannot be prior to n the Florida Department of State.) Note: If the date inserted in this blothis date will not be listed as the do	r more than 90 days after the ck does not meet the applicab	le statutory filing requirements
19	day of Man	2027
Signature of each general partner: I herein are true. I/We am/are aware Department of State constitutes a the	We submit this document and hat any false information sub-	affirm that the facts stated mitted in a document to the
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$52.50 \$8.75	\$35 Registered Agent Fee)

Page 2 of 2