A2200000652

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(В	usiness Entity Namo	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	196
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Office Use Only



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ALLAHASSEE, FLO

2022 NOV 18 PM 3: LF

2022 NOV 22 AM 8: 59

APPROVED

NOV 28 2022 K. Brumbley FEORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624

Blue Rock Three LLLP

\$1000.00

Walk in Pick up time Mail out Photocopy	Will wait
Certified Copy of Articles of Organization	
Certificate of Status	
NEW FILINGS Profit Not for Profit Limited Liability Domestication LLLP CORP	AMMENDMENTS AmendmentResignation of R.A. Officer/DirectorChange of Registered AgentDissolution/WithdrawalMergerConversionAFFIDAVID BY FOREIGN CORP.
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing Statement of Partnership Reinstatement
APOSTIL Country	Other

EXAMINER'S INITIALS:_____

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: BLUE ROCK THREE LLLP					
Name of Florida Limited Pa	artnership or Limited Liability Limited Partnership				
The enclosed Certificate of Limited Partnership and fees are submitted for filing.					
Please return all correspondence concerning	this matter to:				
Sandra Z. Green, Esq.					
Contact Person					
JONATHAN II. GREEN & ASSOCIATES, P.A.					
Firm/Company					
901 Ponce de Leon Boulevard, Suite 601					
Address					
Coral Gables, Florida 33134					
City, State and Zip Code					
E-mail address: (to be used for future annual re	port normation)				
For further information concerning this matt	er, please call:				
Sandra Z. Green	_at ()_372-5100				
Name of Contact Person	Area Code and Daytime Telephone Number				
Enclosed is a check for the following amour	nt:				
\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) \$1,008.75 Filing Fees and Certificate of Status	\$1,052.50 Filing Fees and Certified Copy \$1,061.25 Filing Fees. Certified Copy. and Certificate of Status				
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				

CR2E030 (6/17)

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

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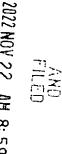
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

2.	5160 North Bay Road
_ `	(Street address of initial designated office)
	Miani Beach, Florida 33140
3.	JONATHAN H. GREEN & ASSOCIATES, P.A.
	(Name of Registered Agent for Service of Process)
4.	901 Ponce de Leon Boulevard, Suite 601
	(Florida street address for Registered Agent)
	Coral Gables, Florida 33134
W,	I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply ith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar ith and accept the obligations of my position as registered agent. Signature of Registered Agent
	(Mailing address of initial designated office)
	Miami Beach, Florida 33140

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



Page 1 of 2



8. Name and business address of ea Name:	Business Address:	
Blue Rock Seven GP, LLC	5160 North Bay Road	
	Miami Beach, Florida	33140
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o more at the total and the de-	ata of Glina	
9. Effective date, if other than the d (Effective date cannot be prior to no the Florida Department of State.) Note: If the date inserted in this block	or more than 90 days after the	ble statutory filing requirements
this date will not be listed as the doc	cument's effective date on the	e Department of State's records
Signed this 23rd	day of	2022
Signature of each general partner: I/herein are true. I/We am/are aware t Department of State constitutes a th	hat any false information sul	omitted in a document to the
BLUE ROCK SEVEN GP, LLC, Ge	neral Partner Document	Number: L22000409743
By: BLUE ROCK SEVEN, LLC, Ma	16 F	enants by the Entirety, Manager
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee an \$52.50 \$8.75	

Page 2 of 2