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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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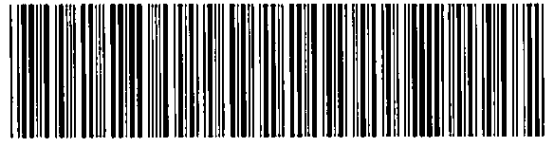
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CAPITAL CONNECTION, INC.

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

MIAMI RIVER MEDICAL OFFICES, L.P.

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

Signature _____

Requested by:

Name Date Time

Walk-In _____ Will Pick Up _____

**CERTIFICATE OF LIMITED PARTNERSHIP OF
MIAMI RIVER MEDICAL OFFICES, LP**

ARTICLE I - NAME

The name of the limited partnership is Miami River Medical Offices, LP.

ARTICLE II - ADDRESS

The mailing address of the office of the initial designated office of the limited partnership is 29 O. Box #280, Lawrence, NY 11559. The street address of the initial designated office of the limited partnership is 12 Bayview Avenue, #280, Lawrence, NY 11559.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S
ACCEPTANCE**

The name and address of the registered agent and office is:

Blalock Walters, P.A.
2 North Tamiami Trail, Suite 400
Sarasota, FL 34236

Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relative to the proper and complete performance of such duties, and is familiar with and accepts the obligations of the position as registered agent as provided for in Chapter 620, Florida Statutes.

Blalock Walters, P.A., a Florida professional corporation

By: Matthew J. Lapointe
Matthew J. Lapointe, Principal

ARTICLE IV - GENERAL PARTNER

The name and business address of the General Partner is as follows: Madera Baya, LLC, a Florida limited liability company, 12 Bayview Ave #280, Lawrence, NY 11559.

ARTICLE V - LIMITED LIABILITY LIMITED PARTNERSHIP

The limited partnership does not elect to be a limited liability limited partnership.

IN WITNESS WHEREOF, this Certificate of Limited Partnership is executed this 5th day of December, 2022.

GENERAL PARTNER:
Madera Baya, LLC, a Florida limited liability company

By: Avram Weissman
Avram Weissman, Manager

APPROVED
AND
FILED
2022 DEC - 5 AM 8:29
STATE OF FLORIDA
TAMPA COUNTY CLERK