

A23000000329

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

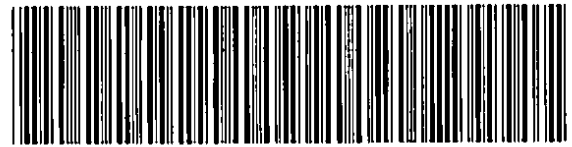
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED

2023 JUN 30 AM 11:00

CLERK OF COURT
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

2023 JUN 30 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 30 2023

K. Brumby

2

CT CORP
(850) 656- 4724
3558 lakesore Drive
Tallahassee, FL 32312

Date: 06/30/2023

Acc#I20160000072

en: c DW

Name:	BAH Florida Ventures, LP
Document #:	
Order #:	15011874 - 6

Certified Copy of Arts & Amend:	☐			
Plain Copy:	☐			
Certificate of Good Standing:	☐			
Certified Copy of	☐			
Apostille/Notarial Certification:	☐		Country of Destination:	
			Number of Certs:	

Filing: ☒	Certified: ☒
	Plain: ☐
	COGS: ☐

Email Address for Annual Report Notificatio

leslie@tbsg.com

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **1052.50**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAH Florida Ventures, LP

Name of Florida Limited Partnership 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:

Leslie Winston

Contact Person

Brownstone Commercial, LLC

Firm/Company

6517 Mapleridge Street

Address

Houston, TX 77081

City, State and Zip Code

leslie@tbsg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie Winston

at (713) 432-7727

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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)

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

1. BAH Florida Ventures, LP
(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. 6517 Mapleridge Street
(Street address of initial designated office)
Houston, TX 77081

3. C T Corporation System
(Name of Registered Agent for Service of Process)

4. 1200 South Pine Island Road
(Florida street address for Registered Agent)
Plantation, Florida 33324

5. 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.

By: C T Corporation System Candice Pignataro, Assistant Secretary
Candice Pignataro
Signature of Registered Agent

6. 6517 Mapleridge Street
(Mailing address of initial designated office)
Houston, TX 77081

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

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AND
FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

BAH Florida Ventures GP, LLC

6517 Mapleridge Street

Houston, TX 77081

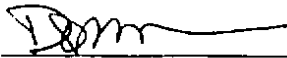
9. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 28th day of June, 2023

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Doak D. Brown, Mgr, BAH Florida Ventures GP

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75