

A23000000514

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(Business Entity Name)

(Document Number)

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LP

1. PDG WEST CLUB, LP

(CORPORATE NAME AND DOCUMENT #)

file second

2.
(CORPORATE NAME AND DOCUMENT #)

3.
(CORPORATE NAME AND DOCUMENT #)

4.
(CORPORATE NAME AND DOCUMENT #)

5.
(CORPORATE NAME AND DOCUMENT #)

6.
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PDG WEST CLUB, 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:

JILL M. LAGER

Contact Person

AGPM, LLC/BANYAN REALTY ADVISORS, LLC

Firm/Company

470 COLUMBIA DRIVE, SUITE A202

Address

WEST PALM BEACH, FL 33409

City, State and Zip Code

jlager@banyanadvisor.com

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

For further information concerning this matter, please call:

JILL M. LAGER

at (561) 478-9800 x2082

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**

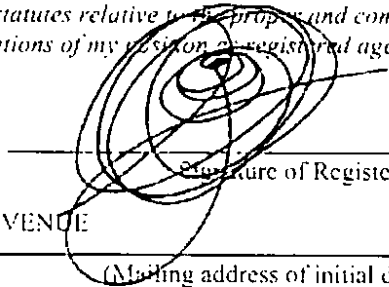
1. PDG WEST CLUB, LP
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership,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

2. 501 N. MAGNOLIA AVENUE
(Street address of initial designated office)
ORLANDO, FLORIDA 32801

3. SCOTT ZIMMERMAN
(Name of Registered Agent for Service of Process)

4. 501 N. MAGNOLIA AVENUE
(Florida street address for Registered Agent)
ORLANDO, FL 32801

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.*



Signature of Registered Agent

6. 501 N. MAGNOLIA AVENUE
(Mailing address of initial designated office)
ORLANDO, FLORIDA 32801

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

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8. Name and business address of each general partner:

Name:

Business Address:

PDG WEST CLUB GP, LLC

501 N. MAGNOLIA AVENUE

ORLANDO, FLORIDA 32801


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 20th day of September, 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.

PDG WEST CLUB GP, LLC, a
Florida limited liability company
By: 
Scott Zimmerman, Manager

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75