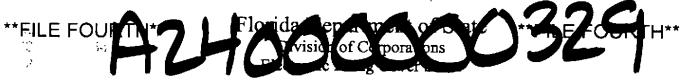
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		وسع المساور الم
	Division of Corporations	:
	Fax Number : (850)617-6383	2
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From:		
	Account Name : CAPITOL SERVICES, INC.	
	Account Number : I20160000017	(.
	Phone : (855)498-5500	7
		-
	1 (000)432*30ZZ	
	Fax Number : (800)432-3622	

Enter the email address for this business entity to be used for future in Edminus report mailings. Enter only one email address please.

Address:_____

FILE EOURTH AFFER: H24000217649 3 H24000217651 3

FLORIDA/FOREIGN LP/LLLP HELM'S BAY LANDING, LTD.

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Page Count	04
Estimated Charge	\$1,052.50

FILE FOURTH AFTER: H24000217644 3 H24000217649 3 H24000217651 3

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Corporate Filing Menu

Help

JUN 25 2024

K. Brumbley

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COVER LETTER

TO:	Registration Section Division of Corporation	าทร				
	•					
SUB	JECT: Helm's Bay Landing					
	Name of I	Honda Limited I	Partnership or Li	miled Liability	y Limited Partnership	
The e	nclosed Certificate of L	imited Partner	rship and fees	are submitt	ed for filing.	
Pleas	e return all corresponder	nce concernin	g this matter t	o:		
Jennie	: Lagmay					
	Contac	t Person				
Wend	over Housing Partners, LLC					
	Firm/Co	этралу				
1105	Kensington Park Drive, Suite	200				
	Ade	dress				
A Irom	onte Springs, FL 32714					
711WIH	· · · · · · · · · · · · · · · · · · ·	17. 0.1.	 			
П		nd Zip Code				
-	my@wendovergroup.com -mail address: (to be used to	a filtura amazial a		······		
	>uran aggress: ((g ge nago to	a infaic animai i	eport normano	11)		
For h	arther information conce	rnitig this ma	tter, please ca	H:		
Jennie	Lagmay		at (⁴⁰⁷) 333-323	3 ext. 210	
-	Name of Contact Person			and Daytime	Telephone Number	
Enclo	sed is a check for the fo	llowing amou	int:			
(\$9 \$3	,000.00 Filing Fees \$1,0 265 Filing Fee and and C 5 Registered Agent Statuse)	Certificate of	s 31,052.50 and Certifi		\$1,061.25 Filing Fe Certified Copy, and Certificate of Status	
STRI	EET ADDRESS:		MA	ILING AD	DRESS:	
Regis	stration Section Registration Section					
Division of Corporations			Division of Corporations			
	on Building			Box 6327		
	Executive Center Circle hassee, FL 32301	;	1 8111	ahassee, FL	32314	
	030 (6/17)					

17656 3

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CERTIFICATE OF LIMITED PARTNERSHIP	
FOR	
FLORIDA LIMITED PARTNERSHIP	
OR	
LIMITED LIABILITY LIMITED PARTNERSHIP	
Helm's Bay Landing, Ltd.	
Nappa of Limited Partnership or Limited Liebility Limited Partnership, which must include suffix) Acceptable Limited artnership suffixes: Limited Partnership, Limited, L.P., L.P., or Ltd. Acceptable Limited Liability Limited Partnersh affixes: Limited Liability Limited Partnership, L.L.L.P., or LLLP.	ip
1105 Kenaington Park Drive, Suite 200	
(Street address of initial designated office)	
Altamonte Springs, Florida 32714	
73	
Rebecca Rhoden	
(Name of Registered Agent for Service of Process)	
215 E. Bola Drive	
(Florida street address for Registered Agent)	
Ortando, Florida 32801	
i. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree with the provisions of all statutes relative to the proper and complete performance of my duties, and I am with and accept the obligations of my position as registered agent.	
Signature of Registered Agent	
Signature of Registered Agent	
1105 Kensington Park Drive, Suite 200	
: (Mailing address of initial designated office)	_
Altamonte Springs, FL 32714	
7. If ilmited partnership elects to be a limited liability limited partnership, check box]. [92] S.
Page 1 of 2	75 18 3-
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\$52.50

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\$8.75

Cërtified Copy (optional):

Certificate of Status (optional):

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