

B06000000021

Florida Department of State
Division of Corporations
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DIVISION OF CORPORATION

FLORIDA/FOREIGN LP/LLP

Cripple Creek Partners, LP

Certificate of Status	0
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Page Count	06
Estimated Charge	\$1,000.00

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRIPPLE CREEK PARTNERS, LP
(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

(Contact Person)

(Name/Company)

(Address)

(City, State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person)

at (_____) _____
(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee)	☐ \$1,006.75 Filing Fee and Certificate of Status	☐ \$1,052.50 Filing Fee and Certified Copy	☐ \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
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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

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TALLAHASSEE, FLORIDA

2006 JUN 10 PM 1:25

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. Crople Creek Partners, 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.L.P.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Delaware

(State or Country of Formation)

3. January 4, 2006

(Date of Formation)

4. CT Corporation System

(Name of Registered Agent for Service of Process)

5. 1200 South Pine Island Road

(Florida street address for Registered Agent)

Plantation, Florida 33324

6. *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.*

CT Corporation System

By: Juan Grajeda

Signature of Registered Agent

Juan Grajeda
Assistant Secretary

7. 220 Sunrise Avenue, Suite 208, Palm Beach, Florida 33480

(Principal office address)

8. If limited partnership is a limited liability limited partnership, check box ☐

9. 220 Sunrise Avenue, Suite 208, Palm Beach, Florida 33480

(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

Cripple Creek Advisors, LLC

(Name)

220 Sunrise Avenue, Suite 208

(Street Address)

Palm Beach, Florida 33480

220 Sunrise Avenue, Suite 208

(Mailing Address)

Palm Beach, Florida 33480

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

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TALLAHASSEE, FLORIDA

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_____	_____
(Name)	(Street Address)
_____	_____
_____	(Mailing Address)
_____	_____
(Name)	(Street Address)
_____	_____
_____	(Mailing Address)
_____	_____

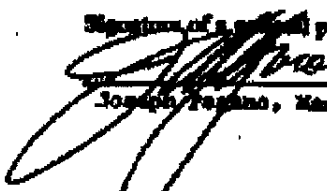
11. Effective date, if other than the date of filing: _____

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

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 4th _____ day of January _____ 20 06

Signature of a general partner: Cripple Creek Advisors, LLC


Joseph Pagan, Manager

Filing Fee:	\$1,000.00 (2005 Filing Fee and \$15 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Existence (optional):	\$2.75

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

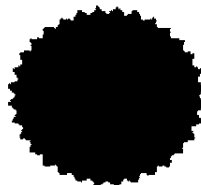
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRIPPLE CREEK PARTNERS, LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF JANUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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TALLAHASSEE, FLORIDA

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Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 4437246

DATE: 01-10-06