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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone) #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	-
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	wo7.4	,2549

Office Use Only



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2000 JAN 18 P U: 0:
SECRETARY OF STATE
TALLAHASSEE, FI OBIO

A. LUNT
JAN 2 2 2008
EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 31, 2007

CARL R. HANSEN 14621 MIRABELLE VISTA CIR. TAMPA, FL 33626

SUBJECT: BLACK SHEEP HOLDING LIMITED PARTNERSHIP

Ref. Number: W07000062549

We have received your document for BLACK SHEEP HOLDING LIMITED PARTNERSHIP and your check(s) totaling \$1052.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.496, Florida Statutes, was amended effective July 1, 2007, to require the pane of a limited liability company to be distinguishable from the names of all other fillings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 607A00072126

Division of Comparations D.O. POV 6207 Tellahanna Florida 20214

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: BLACK SHEEP HOLDINGS LIMITED PARTNERSHIP

(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:

CARL R. HANS	SEN			JAN 18 CRETARY LAHASSE
	(Contact Person)			SERY 8
CARL R. HANS	EN, CPA			OF STATE
	(Firm/Company)			LOR STA H:
14621 MIRABEL	LE VISTA CIRC	LE		
	(Address)			1
TAMPA, FLORI	DA 33626			
((City, State and Zip Code)	· -		
For further information CARL R. HANS	on concerning this mat	ter, please call:	792-5577	
(Name of Conta	ct Person)		nd Daytime Tele	phone Number)
Enclosed is a check f	or the following amou	nt:		
\$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 and Certified Copy	Certified	.25 Filing Fee, Copy, and e of Status
STREET ADDRESS	S:		NG ADDRES	S:
Registration Section		•	tion Section	
Division of Corporati	ions		of Corporatio	ns
Clifton Building	0. 1	P. O. Bo		1
2661 Executive Cent Tallahassee, FL 3239		i aiianas	see, FL 32314	ł

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA

1 BLACK SHEED HOLDINGS (Name of Limited Partnership or Limited L Acceptable Limited Partnership suffixes: Limite Acceptable Limited Liability Limited Partnership or LLLP.	Liability Limited Partnership, which must in ed Partnership, Limited, L.P., LP. or Ltd.		
Black Shadow Ho (If name unavailable, name under which the	limited partnership or limited liability limited		diershill
proposes to register to transact busi 2. NEVADA	ness in Florida; must contain acceptable su 3. 5/19/1999	ıffix.)	
(State or Country of Formation)	(Date of Formation)		
4. STUART M. LAMB			
(Name of Registere	ed Agent for Service of Process)		
5, 110 S SEWALLS POINT R	OAD, STUART, FLORIDA	, 3 499) 6
- · · · · · · · · · · · · · · · · · · ·	ddress for Registered Agent)	CRETA LAHAS	JAN
6. I hereby accept the appointment as registere comply with the provisions of all statutes relative and I am familiar with an accept the obligation.	ve to the proper and complete performance	RY #Fig TAT	agree to tuties,
		E A	\
Signature	e of Registered Agent		
7. 110 S SEWALLS POINT ROA	ND, STUART, FLORIDA 3499	6	
(Princ	ipal office address)		
8. If limited partnership is a limited lial	bility limited partnership, check box	\Box	

Page 1 of 3

9. 110 S SEWALLS POINT ROAD, STUART, FLORIDA 34996 (Mailing address)			
10. Name, principal office address, and m	ailing address of each general partner:	_	
BLACK SHEEP MANAGEMENT, INC. (Name)	110 S SEWALLS POINT ROASTUART, FLORIDA 34996	<u>A</u> D	
	110 S SEWALLS POINT ROAD STUART, FLORIDA 34996	_) _	
(Name)	Fo7-6251 (Street Address)	- -	
	(Mailing Address)	- -	
. (Name)	(Street Address) SSRY 8	- M	
	(Mailing Address) RIA 6	-Ö [;] ·	
· (Name)	(Street Address)	-	
	(Mailing Address)	_	

Page 2 of 3

(Name)		(Street Add	dress)		
		(Mailing A	.ddress)		
(Name)		(Street Add	dress)		
		(Mailing A	ddress)		
			SECRE	2008 JAN	T 1
11. Effective date, if other than the date of	filing:		IASSI	2 2 8	一
(Effective date cannot be prior to no filed by the Florida Department of S		after the da	te thic STATE		U U
12. Attached is a certificate of existe to the delivery of this application to State or other official having custod law of which it is organized.	the Florida Departm	ent of State,	by the S	ecretary	of of
Signed this 20TH day of	of DECEMBER	,2	20 07	·	
Signature of a general partner:	PRESIDEN	ιT			
BLACK SHEEP MAN	AGEMENT, IN	/c,			
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Fili \$52.50 \$8.75	ng Fee and \$35	5 Registere	ed Agent	Fee)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, BLACK SHEEP HOLDINGS LIMITED PARTNERSHIP, as a limited partnership duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 19, 1999, and is in good standing in this state.

OF

Electronic Certificate
Certificate Number: C20071218-0066
You may verify this electronic certificate
online at http://secretaryofstate.biz/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 18, 2007.

ROSS MILLER Secretary of State