

**Blond21**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

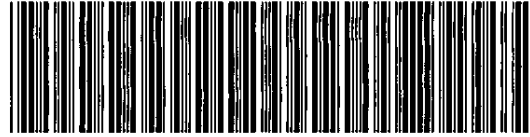
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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01/29/16--01005--016 \*\*1008.75

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SECRETARY OF STATE  
TULSA, OK 74103

S. YOUNG

FEB 01 2016

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **The JEGNIL Schloss Family 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:

**Jonathan D. Kaney III, Esq.**

Contact Person

**Kaney & Olivari, PL**

Firm/Company

**55 Seton Trail**

Address

**32176**

City, State and Zip Code

**Jake@KaneyOlivari.com**

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

For further information concerning this matter, please call:

**Joseph F. Linge (Joey)**

at ( **386** ) **677-7700**

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 Fee,  
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

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16 JUN 29 PM 4:39  
TALLAHASSEE, FLORIDA  
STATE  
SECRETARY OF STATE

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

1. The JEGNIL Schloss Family Limited Partnership

(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.

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. State of Nevada

State or Country of Formation

3. October 7, 2008

Date of Formation

4. Federal Employer Identification Number: 26-3633948

5. Name of Registered Agent for Service of Process and Florida Street Address:

Jonathan D. Kaney III, Esq.

55 Seton Trail

Ormond Beach, FL 32176

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.

[Signature]  
Signature of Registered Agent

7. Principal Office:

4730 S. Apache Rd., Ste 300

Las Vegas, NV 89147

8. Mailing Address:

1541 State Avenue

Holly Hill, FL 32117

9. If limited partnership is a limited liability limited partnership, check box.

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

Name of General Partner: Superior Resources, LLC

Name of General Partner: \_\_\_\_\_

Street Address: 4730 S. Apache Rd., Ste 300

Street Address: \_\_\_\_\_

Las Vegas, NV 89147

Mailing Address: Same

Mailing Address: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_  
 Mailing 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 26 day of January, 2016.

  
 Signature of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that 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.

<b>Filing Fees:</b>	<b>\$1,000.00</b> (\$965 Filing Fee and \$35 Registered Agent Fee)
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

STATE OF NEVADA

**BARBARA K. CEGAVSKE**  
Secretary of State

**JEFFERY LANDERFELT**  
Deputy Secretary  
for Commercial Recordings



OFFICE OF THE  
SECRETARY OF STATE

**Commercial Recordings Division**

202 N. Carson Street  
Carson City, NV 89701-4201  
Telephone (775) 684-5708  
Fax (775) 684-7138

Joseph Linge  
1541 State Ave.  
Holly Hill, FL 32117

**Job: C20160104-1278**  
January 4, 2016

**Special Handling Instructions:**

**Charges**

Description	Document Number	Filing Date/Time	Qty	Price	Amount
Cert of Existence (good standing - short form)	20080668339-05	10/7/2008 7:07:30 AM	1	\$50.00	\$50.00
Total					\$50.00

**Payments**

Type	Description	Amount
Credit	268786 16010409681628	\$50.00
Total		\$50.00

**Credit Balance: \$0.00**

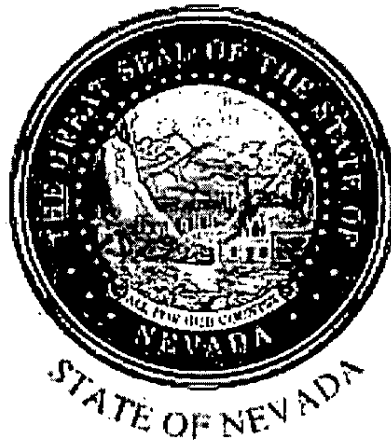
**Job Contents:**

Web Certificate of Good Standing 1  
Short(s):

Joseph Linge  
1541 State Ave.  
Holly Hill, FL 32117

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SECRETARY OF STATE  
701 S. 3RD ST. 70000

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, 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, **THE JEGNIL SCHLOSS FAMILY 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 October 7, 2008, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 4, 2016.

*Barbara K. Cegavske*

BARBARA K. CEGAVSKE  
Secretary of State



Electronic Certificate  
Certificate Number: C20160104-1278  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>

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