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TALLAHASSEE, FLORIDA

D. BRUCE  
JUN 09 2011  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT: MELMARKS ENTERPRISES LLLP**

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:

**MORRIS ENGELBERG, ESQUIRE**

Contact Person

**M. Engelberg & L. Milgrim, P. A.**

Firm/Company

**4040 Sheridan Street**

Address

**Hollywood, Florida 33021**

City, State and Zip Code

**morris\_engelberg@bellsouth.net**

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

For further information concerning this matter, please call:

**Morris Engelberg, Esquire** at ( **954** ) **966-3900**

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

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 TALLAHASSEE, FLORIDA

**CERTIFICATE OF LIMITED PARTNERSHIP  
FOR  
FLORIDA LIMITED PARTNERSHIP  
OR  
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. MEMLARKS ENTERPRISES LLLP

(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 LLLP.*

2. 17906 Aberdeen Way

(Street address of initial designated office)

Boca Raton, Florida 33496

3. Morris Engelberg, Esquire

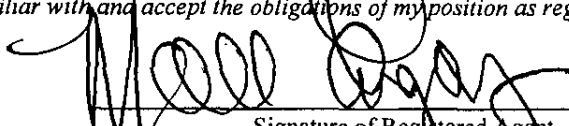
(Name of Registered Agent for Service of Process)

4. 4040 Sheridan Street

(Florida street address for Registered Agent)

Hollywood, Florida 33021

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  
MORRIS ENGELBERG

6. 17906 Aberdeen Way

(Mailing address of initial designated office)

Boca Raton, Florida 33496

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:

MELMARKS ENTERPRISES, INC.

17906 Aberdeen Way

Boca Raton, Florida 33496

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TALLAHASSEE, FLORIDA

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9. Effective date, if other than the date of filing: June 1, 2011

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

Signed this \_\_\_\_\_ day of May, 2011

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.

MELMARKS ENTERPRISES, INC.

By:   
MEL MARKS, President

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