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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

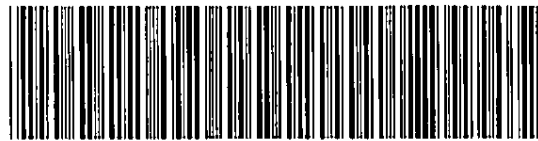
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2022 SEP -7 PM 5:14

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2022 SEP -01 09:029 \$1000.00

S. FRANKLIN
SEP 07 2022

REC
9/7/22

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

2022 AUG 26 PM 3:32

RECEIVED

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE use funds from ~~ACCT. 120210000160. \$1,000~~

Authorization Signature: _____

Linguini Holdings Family LLLP

Business Name

Document #

☐ Walk in

☐ Pick up time _____

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certified copy

☐ Certificate of Status

NEW FILINGS

☐ Profit

☐ Not for Profit

☐ Limited Liability

☐ Domestication

☐ Other

☐ **CORP**

☒ **LIMITED LIABILITY LIMITED PARTNERSHIP**

AMMENDMENTS

☐ Amendment

☐ Resignation of R.A. Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

☐ **Conversion**

☐ Articles of Conversion

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

☐ APOSTIL ()

Country

REGISTRATION/QUALIFICATIONS

☐ Foreign filing

☐ Limited Partnership

☐ Reinstatement

☐ STATEMENT OF AUTHORITY

EXAMINER'S INITIALS: _____

2022 SEP - 7 15:14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Linguini Holdings Family 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:

Sandra Z. Green, Esq.

Contact Person

JONATHAN H. GREEN & ASSOCIATES, P.A.

Firm/Company

901 Ponce de Leon Boulevard, Suite 601

Address

Coral Gables, Florida 33134

City, State and Zip Code

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

For further information concerning this matter, please call:

Sandra Z. Green, Esq.

at (305) 372-5100

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

CR2E030 (6/17)

2022 SEP -7 PM 5:14

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

1. Linguini Holdings Family 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. 3500 SW 147 Avenue

(Street address of initial designated office)

Miramar, Florida 33027

3. JONATHAN H. GREEN & ASSOCIATES, P.A.

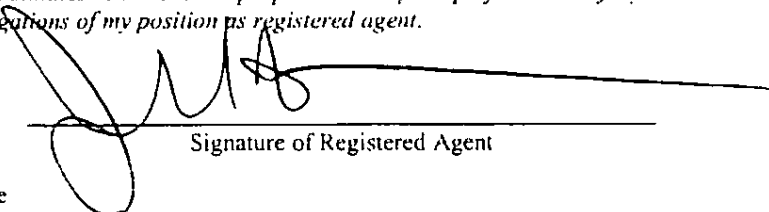
(Name of Registered Agent for Service of Process)

4. 901 Ponce de Leon Boulevard, Suite 601

(Florida street address for Registered Agent)

Coral Gables, Florida 33134

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

6. 3500 SW 147 Avenue

(Mailing address of initial designated office)

Miramar, Florida 33027

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:

Linguini Holdings GP, LLC

3500 SW 147 Avenue

Miramar, Florida 33027

9. Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 25th day of August, 2022

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.

LINGUINI HOLDINGS GP, LLC, as General Partner

By: Michelle C. Lopez
MICHELLE C. LOPEZ, Manager

Filing Fees:

\$1,000.00 (S965 Filing Fee and S35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75