# 12200000 182

| (Re                                     | questor's Name)   |             |  |  |  |
|---|-------------------|-------------|--|--|--|
| (Address)                               |                   |             |  |  |  |
| (Address)                               |                   |             |  |  |  |
| (Cit                                    | y/State/Zip/Phone | e #)        |  |  |  |
| PICK-UP                                 | <b>∏</b> WAП      | MAIL        |  |  |  |
| (Business Entity Name)                  |                   |             |  |  |  |
| (Document Number)                       |                   |             |  |  |  |
| Certified Copies                        | _ Certificates    | s of Status |  |  |  |
| Special Instructions to Filing Officer: |                   |             |  |  |  |
|   |                   |             |  |  |  |
|   |                   |             |  |  |  |
|   |                   |             |  |  |  |

Office Use Only



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CHINES THESE LAHASSEE, FLO

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T. LEMIEUX

## COVER LETTER

| TO;                      | Registration Section Division of Corporations  |                                   |                          |   |                   |
|--------------------------|--|-----------------------------------|--------------------------|---|-------------------|
| SUBJE                    | CT: Vessel Mortgage  |                                   |                          |   |                   |
| . 1 ( ) [ ) . ) [ ]      | Name of Foreign Limited Partn  | ership or Limited                 | Liability                | Limited Partnership   |                   |
| partners                 | losed application, certificate of status and fe<br>hip to transact business in Florida.<br>eturn all correspondence concerning this ma |                                   | o register               | a foreign limited partnership or limited                                | liability limited |
| Suzann                   | e Cupit  |                                   |                          |   |                   |
|                          | Contact Person   |                                   |                          |   |                   |
| Vessel                   | Mortgage   |                                   |                          |   |                   |
|                          | Firm/Company   | <del></del>                       | _                        |   |                   |
| 7C Stor                  | ehouse Lane  |                                   |                          |   |                   |
|                          | Address  |                                   | _                        |   |                   |
| Destreh                  | an, LA 70047   |                                   |                          |   |                   |
|                          | City, State and Zip Code   |                                   | _                        |   |                   |
| •                        | vesselmortgage.com   |                                   | _                        |   |                   |
| E-mai                    | l address: (to be used for future annual repor   | t notification)                   |                          |   |                   |
| For furt                 | her information concerning this matter, pleas  |                                   |                          |   |                   |
| Suzann                   | e Cupit  | _at (                             | 473-73                   |   |                   |
|                          | Name of Contact Person   | Area Code a                       | and Dayti                | me Telephone Number   |                   |
| Enclose                  | d is a check for the following amount:   |                                   |                          |   |                   |
| (\$96                    | 0.00 Filing Fee 55 Filing Fee and Registered Agent Cartificate of Status   | □\$1,052.50 Fili<br>and Certified |                          | ☐\$1,061.25 Filing Fee,<br>Certified Copy, and<br>Certificate of Status |                   |
|                          | Mailing Address: Registration Section  |                                   |                          | Address:<br>ration Section  |                   |
| Division of Corporations |  |                                   | Division of Corporations |   |                   |

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

Taliahassee, FL 32303

2415 N. Monroe Street, Suite 810



February 21, 2022

SUZANNE CUPIT 7C STOREHOUSE LN DESTREHAN, LA 70047

SUBJECT: VESSEL MORTGAGE L.P.

Ref. Number: W22000021799

We have received your document for VESSEL MORTGAGE L.P. and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Letter Number: 722A00004253

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

#### APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT RUSINESS IN ELORIDA

TO TRANSACT BUSINESS IN FLORIDA Vessel Mortgage L.P. (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 LI.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. Louisiana 3. 08/24/2021 State or Country of Formation Date of Formation 4. Federal Employer Identification Number: 87-1059002 5. Name of Registered Agent for Service of Process and Florida Street Address: Florida Registered Agent LLC 7901 4th Street N. Suite 300 St. Petersburg, FL 33702 6. Thereby 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 7. Principal Office: 8. Mailing Address: C Storehouse 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:\_\_\_\_ Julie Cupit
Name of General Partner:\_\_\_\_ 95 Holly Drive 120 Ashley Drive Street Address: Street Address: LaPlace, LA 70068 LaPlace, LA 70068 Mailing Address: Name of General Partner:\_\_\_\_\_\_\_ Name of General Partner:\_\_\_\_\_ \_\_\_\_ Street Address: Street Address:

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

Mailing Address:

# Page 1 of 2

| 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:   |  |  |  |  |  |  |
| 12. Attached is a certificate of existence duly authenticated, not n<br>Florida Department of State, by the Secretary of State or other of<br>the law of which it is organized. | nore than 90 days prior to the delivery of this application to the ficial having custody of the entity's records in the jurisdiction under |  |  |  |  |  |
| Signed this 24th day of January   | Penit  |  |  |  |  |  |
| Signature   | of a general partner   |  |  |  |  |  |
| The individual signing this document affirms that the facts stated submitted in a document to the Department of State constitutes a   |  |  |  |  |  |  |

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75

Page 2 of 2



Department of State / Division of Corporations / Search Records / Search by Entity Name /

# **Detail by Entity Name**

Rejected Filing

**VESSEL MORTGAGE** 

**Filing Information** 

Document Number/

W22000021799

Filed Date

02/21/2022

**Expire at Usual Time** 

Υ

**Penalty Fee** 

00.00

**Associated Document** 

Number

**Document Type** 

Filed By

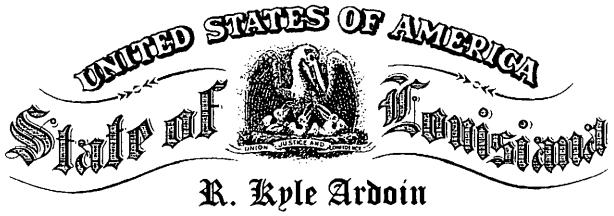
SUZANNE CUPIT

7C STOREHOUSE LN

DESTREHAN, LA 70047

**Document Images** 

No images are available for this filing.



SECRETARY OF STATE

As Secretary of States of the State of Louisiana I do hereby Certify that

### **VESSEL MORTGAGE**

A/An LOUISIANA Partnership whose principal place of business is DESTREHAN, LOUISIANA,

Filed partnership documents and registered to do business in this State on July 01, 2021.

I further certify that no certificate of termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

August 19, 2021

R 12fe No. Secretary of State

Web 44490879J



Certificate ID: 11445002#WMJ62

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov