

B98000000441

Daniel B. Geraghty

Requestor's Name

46 Godfrey + Kahn, S.C.  
780 North Water Street

Address

Milwaukee, WI 53202-3590

City/State/Zip

Phone #

(414) 273-3500

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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-07/07/98-01109-002  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

- ☐ Walk in ☐ Pick up time \_\_\_\_\_  
☐ Mail out ☐ Will wait ☐ Photocopy

- ☐ Certified Copy  
☐ Certificate of Status

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FF 87.50  
(L.P.)

Daniel Geraghty

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
Name	Domestication
Availability	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

Document	
Examiner	DCC
Updater	Annual Report ncc
Updater	Fictitious Name DCC
Verifier	Name Reservation DCC
Acknowledgement	DCC
W. P. Verifier	DCC

REGISTRATION/ QUALIFICATION	
	Foreign
X	Limited Partnership
	Reinstatement
	Trademark
	Other

add INFORMATION BY PHONE TO  
GP's address  
DATE 7/6/98  
DOC. EXAM dec

B98000000441

Examiner's Initials

W98000012070



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

May 27, 1998

DANIEL B. GERAGHTY  
C/O GODFREY & KAHN, S.C.  
780 NORTH WATER STREET  
MILWAUKEE, WI 53202-3590

SUBJECT: MBE PARTNERS, LTD.  
Ref. Number: W98000012070

We have received your document for MBE PARTNERS, LTD., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$87.50.

You must list the address of the general partner.

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) 487-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 898A00029726

Florida Department of State, Sandra B. Mortham, Secretary of State

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. MBE Partners, Ltd.  
(Name of limited partnership as it is in the home state)
2. \_\_\_\_\_  
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida must contain the word "LIMITED" or "LTD.")
3. Colorado 4. July 8, 1994  
(State of Formation) (Date of Formation)
5. C T Corporation System  
(Name of Registered Agent for Service of Process)
6. 1200 South Pine Island  
Plantation Florida 33324  
(City) (Street Address of Registered Office) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:  
PETER F. SOUZA  
ASSISTANT SECRETARY  
(Agent must sign on this line)
8. W141 N9240 Fountain Boulevard  
Menomonee Falls, WI 53051  
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS  
Mary Beth Uí Bhraonáin 19370 Baythorn Way, Brookfield, WI 53045  
STREET ADDRESS
10. 19370 Baythorn Way, Brookfield, WI 53045  
(Office where Names, Addresses and Contributions of Limited Partners are kept)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.
12. 19370 Baythorn Way, Brookfield, WI 53045  
(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 26 day of Feb, 19 98  
Mary Beth Uí Bhraonáin  
General Partner

STATE OF Wisconsin  
COUNTY OF Waukesha  
On this 26 day of Feb, 19 98

Mary Beth Uí Bhraonáin personally appeared before me,  
☒ who is personally known to me  
☐ whose identity I proved on the basis of \_\_\_\_\_

Susan L. Martina  
(Notary Public Signature)  
Susan L. Martina  
(Notary's Printed Name)

Seal

My Commission Expires: 8-23-98

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared \_\_\_\_\_  
a general partner of MBE Partners, Ltd, a ~~xxx~~  
Colorado limited partnership, hereinafter referred to as the "Partnership," who certified as follows:

1. The amount of capital contributions of the limited partners is \$ 1,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 0.

*Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.*

This 26<sup>th</sup> day of Feb, 19 98.

MB U'Bharaonain  
General Partner

STATE OF Wisconsin

COUNTY OF Waukesha

On this 26 day of Feb, 19 98.

Mary Bet U'Bharaonain personally appeared before me.

☒ who is personally known to me  
☐ whose identity I proved on the basis of \_\_\_\_\_

Susan L. Martin  
(Notary Public Signature)

SUSAN L. MARTIN  
(Notary's Printed Name)

Seal

My Commission Expires:

8-23-98

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

98 JUL -6 PM 1:25

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