

# A00000000657

Frank J. Grillo

Requestor's Name

13899 Biscayne Blvd., Suite 400B

Address

N. Miami Bch., FL 33181

City/State/Zip

Phone #

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 #)

700003176147--4

-03/20/00-01111-010

\*\*\*\*\*78.75 \*\*\*\*\*78.75

700003176147--4

-04/18/00-01105-006

\*\*\*\*\*26.25 \*\*\*\*\*26.25

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED  
00 APR 19 AM 8:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

~~1000~~  
A00-657  
4/19



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

March 22, 2000

FRANK J. GRILLO  
13899 BISCAYNE BLVD., SUITE 400B  
NORTH MIAMI BEACH, FL 33181

SUBJECT: DONZI MIAMI LIMITED PARTNERSHIP  
Ref. Number: W00000007659

We have received your document for DONZI MIAMI LIMITED PARTNERSHIP and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The fee to file the above reference limited partnership is \$105.00.

There is a balance due of \$26.25.

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) 487-6917.

Gretchen Harvey  
Document Specialist Supervisor

Letter Number: 000A00015869

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## CERTIFICATE OF LIMITED PARTNERSHIP

1. DONZI, MIAMI LIMITED PARTNERSHIP  
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 13899 BISCAYNE BLVD. SUITE 400B, NORTH MIAMI BEACH, FL 33181  
( Business address of Limited Partnership)
3. FRANK J. GRILLO  
(Name of Registered Agent for Service of Process)
4. 13899 BISCAYNE BLVD. SUITE 400B, NORTH MIAMI BEACH, FL 33181  
(Florida street address for Registered Agent)
5.   
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 13899 BISCAYNE BLVD. SUITE 400B, NORTH MIAMI BEACH, FL 33181  
( Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: 3/17/2003
8. Name(s) of general partner(s): \_\_\_\_\_ Street address: \_\_\_\_\_

<u>FRANK J. GRILLO</u>	<u>13899 BISCAYNE BLVD. SUITE 400B</u>
_____	<u>NORTH MIAMI BEACH, FL 33181</u>
_____	_____
_____	_____

*Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.*

Signed this 17th day of MARCH, 19 2000

Signature of all general partners:

  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS  
FOR FLORIDA LIMITED PARTNERSHIP**

*The undersigned constituting all of the general partners of \_\_\_\_\_*

DONZI MIAMI LIMITED PARTNERSHIP

*a Florida Limited Partnership, certify:*

The amount of capital contributions to date of the limited partners is \$ 10,000.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$ 10,000.

Signed this 17th day of MARCH, 192000.

FURTHER AFFIANT SAYETH NOT.

*Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.*

  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

\_\_\_\_\_  
General Partner

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