

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**LIMITED
PARTNERSHIP
REINSTATEMENT**



**FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS**

FILED

2011 JAN 26 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A01000000159

1. Name of Limited Partnership

NORTH PALM ESTATES, LTD

2. Principal Office Address - No P.O. Box #
7901 W. 25 Ave

3. Mailing Office Address
7901 W. 25 Ave

Suite, Apt. #, etc.
#3

Suite, Apt. #, etc.
#3

City & State
Hialeah, FL

City & State
Hialeah, FL

Zip
33016

Country

Zip
33016

Country

100191780281
01/18/11--01064--015 **1000.00

CR2E039 (1/11)

4. Date Formed or Registered
To Do Business in Florida **1/30/2001**

5. FEE Number
651105944

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ **\$8.75 Additional Fee required
for a Certificate of Status**

8. Name and Address of Current Registered Agent

Name
Richard Rafuls

Street Address (P.O. Box Number is Not Acceptable)
7901 W. 25 Ave

Suite, Apt. #, Etc.
#3

City
Hialeah

FL **33016**

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited
partnership revoked on our records.

E-mail Address:

E-Mail address to be used for future annual report notices.

9. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes

SIGNATURE (Registered Agent Accepting Appointment)

(REGISTERED AGENT MUST SIGN)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
Richard Rafuls Hector Marrero	7901 W. 25 Ave., #3 7901 W. 25 Ave., #3	Hialeah, FL 33016 Hialeah, FL 33016	

REINSTATEMENT

100191780281
01/28/11--01001--003 **1000.00

OR 1-27-11

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. In the event that the information supplied is deemed exempt from public access, I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes. I am aware that 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.

SIGNATURE

DATE **January 13, 2011**

Richard Rafuls
Richard Rafuls

Typed or Printed Name of General Partner Signing Form

Telephone Number