

A0100000780

HOLLAND & Knight LLP  
Requestor's Name

315 So. Calhoun St. Suite 600  
Address

Tallahassee, FL 32301-425-5675  
City/State/Zip Phone #

Office Use Only

FILED  
01 JUN -7 AM 10:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. Marcelina, LHP  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

BK

- ☐ Walk in ☐ Pick up time ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

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

100004375371--3  
-06/07/01--01033--012  
\*\*\*1818.75 \*\*\*\*\*33.75

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☒ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

UNITED STATES DEPARTMENT OF COMMERCE  
BUREAU OF ECONOMIC ANALYSIS  
1-1000 1002

**STATEMENT OF QUALIFICATION FOR  
FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership as identified in the records of the Florida Department of State:  
Marcelina, LLLP

Insert limited partnership's Florida document number: A01000000780

or

Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

2. Suffix adopted for the above named partnership: LLLP  
(LLLP, L.L.L.P.)

3. The street address of its chief executive office:  
(if different from current recorded address):

4. The street address of principal office in Florida:  
(if different from above)

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. The effective date of this filing shall be:

X as of the date this document is filed with the Florida Secretary of State

or

     a date later than the time of filing:                     

7. The name and Florida street address of the partnership's agent for service of process:

Intrastate Registered Agent Corporation

701 Brickell Ave., 28th Floor

Miami, Florida 33131

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 6th day of June, 2001.

Signature of TWO Partners:

X Maureen A. Rorech  
X Maureen A. Rorech

Pres., MLDJ II, Inc., G.Pr.

, L.Pr.

Typed or printed names of partners signing above: Maureen A. Rorech, as Pres. of MLDJ II, Inc.  
Maureen A. Rorech, individually

Filing Fee: \$25.00  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75