

A010000001274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500062085785

12/15/05--01016--004 \*\*25.00

FILED  
2005 DEC 15 PM 2:20  
TALLAHASSEE, FLORIDA

DEC 19 2005

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: 758 Washington Avenue Ltd.  
(Name of Limited Partnership)

DOCUMENT NUMBER: A01000001274

The enclosed Statement of Qualification for Florida Limited Liability Limited Partnership and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ted Klein  
(Name of Person)

Theodore S. Klein Attorney at Law  
(Firm/Company)

8030 Peters Road, Suite D-104  
(Address)

Plantation, Florida 33324  
(City/State and Zip Code)

FILED  
2005 DEC 15 PM 2:50  
CORPORATIONS  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Ted Klein at (954) 370-2533  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**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:

758 Washington Avenue Ltd.

Insert limited partnership's Florida document number: A01000001274

or

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

2. The complete name of the entity after filing Statement of Qualification shall be:

758 Washington Avenue Ltd. LLLP

(Must include LLLP or L.L.L.P.)

3. The street address of its chief executive office: 900 Bay Drive, PH1

(if different from current recorded address):

Miami Beach, Florida 33141

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:

☒ 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:

Steven Levinson, 900 Bay Drive, PH1, Miami Beach, Florida 33141

\_\_\_\_\_, Florida \_\_\_\_\_

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 12<sup>th</sup> day of December, 2005.

Signature of TWO Partners: \_\_\_\_\_

see attached execution page

Typed or printed names of partners signing above: see attached execution page

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

FILED  
2005 DEC 15 PM 2:20  
JIMMYE L. BARNES, CLERK  
TALLAHASSEE, FLORIDA

Partner execution page for Statement of Qualification

Dated as of Dec 12, 2005.

758 Washington Ltd., a Florida limited partnership

By: Pelican Harbour Management, Inc., a Florida corporation as its sole general partner

By: [Signature]  
Steven Levinson, Its President

Joinder by at least one Limited Partner:

Levinson/Berson Family Revocable Trust U/A/D October 18, 2001

By: [Signature]  
Steven Levinson, Co-Trustee

By: [Signature]  
Judith Berson, Co-Trustee

FILED  
2005 DEC 15 PM 2:50  
DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA