

Capitol Building, Tallahassee, FL 32301

1406 Hays St., Tallahassee, FL 32301

Tallahassee, FL 32301

(850) 878-4734  
Kathi or Brent

A010000001492

Office Use Only

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

1. Katz Family Limited Partnership  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

FILED  
01 NOV -5 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

☒ Walk in

☒ Pick up time 11/5

☐ Certified Copy

BK

☐ Mail Out

☐ Will wait

☒ Photocopy (2)

☐ 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

**REGISTRATION/QUALIFICATION**

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

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

RECEIVED  
01 NOV -5 AM 11:08  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

300004665439--9  
-11/05/01--01027--012  
\*\*\*1785.00 \*\*\*1785.00



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

November 5, 2001

*Please back date*

*Resubmit*  
01-NOV-5 PM 1:30  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CAPITOL SERVICES, INC.

TALLAHASSEE, FL

SUBJECT: KATZ FAMILY LIMITED PARTNERSHIP  
Ref. Number: W01000025451

We have received your document for KATZ FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1785.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The limited partnership name designated in the document is not available since it is the same as, or not distinguishable from the name of another entity on file with this office. Please select a new name and make the substitution in all the appropriate places.

ALSO, please note that since the general partner is a trust, you have two choices. You could file a Fictitious Name Registration listing the name of the trust, and the trustee as the "owner". What we strongly recommend is the second option.

In Item 5, add the name of the trustee.

Identify the general partner as:

LINDA B. LIPSON, TRUSTEE  
EDNA A. KATZ REVOCABLE LIVING TRUST,  
u/a/d NOVEMBER 13, 1984  
4237 Palacio Drive  
Sarasota, FL 34238

By doing this you will be giving us permission to list the name of the trustee in the general partner field on our computer listing. Our computer format doesn't allow enough room to list both the trustee name and the name of the trust.

Most people choose the second option.

Please note that we have RETAINED your \$1,785.00 payment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

RECEIVED  
NOV 7 11:04 AM '01  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATE  
AND FINANCIAL SERVICES

If you have any questions concerning the filing of your document, please call  
(850) 245-6914.

Buck Kohr  
Corporate Specialist

Letter Number: 901A00060106

FILED  
01 NOV -5 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AFFIDAVIT AND CERTIFICATE OF  
EDNA A. KATZ FAMILY LIMITED PARTNERSHIP

01 NOV -5 PM 1:30  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

THIS CERTIFICATE is executed on October 31, 2001 with respect to the EDNA A. KATZ FAMILY LIMITED PARTNERSHIP ("the Partnership").

1. Name. The partnership's name is EDNA A. KATZ FAMILY LIMITED PARTNERSHIP.

2. Partnership's Business. The Partnership's business is buying, selling, trading and investing in stocks, bonds, mutual funds, annuities, bank deposits, money market funds, margin accounts, commodities, futures and all other securities as well as owning, developing, leasing, managing and selling real property. The Partnership may also do all things not otherwise illegal under the laws of the State of Florida.

3. Registered Agent. The name and Florida street address of the Partnership's registered agent is:

Linda B. Lipson  
4237 Palacio Drive  
Sarasota, FL 34238

4. Specified Office. The street address of the office at which its records are kept is:

4237 Palacio Drive  
Sarasota, FL 34238

The Partnership's mailing address is:

4237 Palacio Drive  
Sarasota, FL 34238

5. General Partner. The name and street address of the General Partner is:

Linda B. Lipson, Trustee  
EDNA A. KATZ REVOCABLE LIVING TRUST  
u/a/d NOVEMBER 13, 1984  
4237 Palacio Drive  
Sarasota, FL 34238

6. Dissolution. The latest date on which the Limited Partnership is to be dissolved and its affairs wound up is December 31, 2051.

7. Capital Contributions. The amount of the capital contributions of the limited partners and the amount anticipated to be contributed by the limited partners is \$2,500,000.

IN WITNESS WHEREOF, the undersigned General Partner has signed and sealed this Certificate on the day and year first above written.

EDNA A. KATZ REVOCABLE LIVING TRUST  
u/a/d November 13, 1984, as amended,

By: Linda B. Lipson

LINDA B. LIPSON, trustee

STATE OF FLORIDA  
COUNTY OF SARASOTA:

The foregoing instrument was acknowledged before on October 31, 2001, by LINDA B. LIPSON, as the trustee of the Edna A. Katz Revocable Living Trust u/a/d November 13, 1984, as amended, General Partner, on behalf of, <sup>Edna A.</sup> KATZ FAMILY LIMITED PARTNERSHIP, a limited partnership. She is (Notary choose one) [☒] personally known to me, or [☐] has produced \_\_\_\_\_ as identification.

Donna Fay Earhart  
Signature of Notary Public  
Print name: Donna Fay Earhart  
My Commission expires: \_\_\_\_\_



Donna Fay Earhart  
Commission # CC 767971  
Expires SEP. 25, 2002  
BONDED THRU  
ATLANTIC BONDING CO., INC.

FILED  
01 NOV -5 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCEPTANCE OF APPOINTMENT  
OF REGISTERED AGENT

Having been named as registered agent and to accept service of process at the place designated in the forgoing document, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

DATE: October 31, 2001



LINDA B. LIPSON