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

1. GOURMAND, LLP  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

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 -12/17/01--01067--001  
 \*\*\*\*\*25.00 \*\*\*\*\*25.00

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

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NEW FILINGS	
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<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

FF \$25.00

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Examiner's Initials	
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FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

December 12, 2001

HATTON & ASSOCIATES  
2250 SW 3RD AVE FL 5  
MIAMI, FL 33129

SUBJECT: GOURMAND, LLLP  
Ref. Number: W01000028348

We have received your document for GOURMAND, LLLP and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

There is a separate \$25 due for the statement of qualification; please refer to the attached highlighted copy of your statement. Please submit your check for \$25 to my attention, with a copy of this letter, at the address below.

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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 501A00065341

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**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:  
Gourmand, LLLP

Insert limited partnership's Florida document number: \_\_\_\_\_

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  
(LLP, LLLP)

3. The street address of its chief executive office: 141 Giralda Avenue  
(if different from current recorded address): Coral Gables, FL 33134

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:

David L. Hatton, Esq. 2250 SW 3rd Avenue 5th Floor

Miami, Florida 33129

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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 3rd day of December, 2001

Signature of TWO Partners:

Edgar Leal  
David L. Hatton

Typed or printed names of partners signing above: Edgar Leal

David L. Hatton, Esq.

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