

A010000001629

Sender's
Name

Phone 503 538-0220

Company **HATTON & ASSOCIATES**

Address **2250 SW 3RD AVE FL 5**

Dept/Floor/Suite/Room

City **MIAMI**

State **FL** ZIP **33129**

2 Your Internal Billing Reference

Office Use Only

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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☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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NEW FILINGS	
<input type="checkbox"/>	Profit
<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

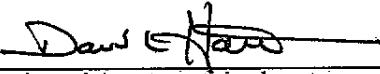
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Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP

1. Gourmand, LLP
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 141 Giralda Avenue, Coral Gables, FL. 33134
(Business address of Limited Partnership)
3. David L. Hatton
(Name of Registered Agent for Service of Process)
4. 2250 S.W. 3rd Avenue, 5th Floor, Miami, FL. 33129
(Florida street address for Registered Agent)
5. 
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)
6. 141 Giralda Avenue, Coral Gables, FL. 33134
(Mailing Address of the Limited Partnership)


7. The latest date upon which the Limited Partnership is to be dissolved is: 11/10/2051
8. Name(s) of general partner(s): _____ Street address: _____

Rene Ventures, LLC L01-K862 141 Giralda Avenue
Coral Gables, FL. 33134

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 8th day of November, 2001

Signature of all general partners:

<u></u> General Partner	_____ General Partner
_____ General Partner	_____ General Partner
_____ General Partner	_____ General Partner

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of _____
Gourmand, LLLP _____,

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 1050.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 5000.00.

Signed this 8 day of November, 2001.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Gourmand, LLLP


General Partner

General Partner

General Partner

General Partner

General Partner

General Partner

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