

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

LIMITED PARTNERSHIP REINSTATEMENT
WBR



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 NOV 15 AM 10:24

DOCUMENT # **A01000001629**

1. Name of Limited Partnership

Gourmand, LLLP

900008726499
10/31/02--01053--001 **141.25

2. Principal Office Address
141 Giralda Avenue

Suite, Apt. #, etc.

City & State
Coral Gables, FL.

Zip Country
33134 U.S.A.

3. Mailing Office Address
2250 S.W. 3rd Avenue

Suite, Apt. #, etc.
5th Floor

City & State
Miami, Florida

Zip Country
33129 U.S.A.

4. Date Formed or Registered To Do Business in Florida 12/17/01

5. FEI Number 04-3590299
Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

7a. Capital Contributions as shown on Record: \$5,000.00

7b. Amount of Capital Contributions in FLORIDA to date: \$7,500.00

8. Name and Address of Current Registered Agent

Name
David L. Hatton, Esq.

Street Address (P.O. Box Number is Not Acceptable)
2250 S.W. 3rd Avenue, 5th Floor

Suite, Apt. #, Etc.

City State Zip Code
Miami FL 33129

FEES:

- 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
 - 2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.
 - 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.
- Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) *David L. Hatton* DATE 10/24/02

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
Rene Ventures, LLC	141 Giralda Avenue	Coral Gables, FL. 33134	L01000019862

WBR
11/19/02

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE *Edgar Leal* DATE 10/24/02

Typed or Printed Name of General Partner Signing Form **EDGAR LEAL AS MANAGER OF RENE VENTURES, LLC** Telephone Number **305-445-1001**

CR2E039 (10/02)

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DAVID L. HATTON, P.A.
ATTORNEY AT LAW

2250 S.W. 3RD AVENUE, 5TH FLOOR
MIAMI, FLORIDA 33129

TELEPHONE: (305) 856-0084
FAX: (305) 854-6810
dhatton@hattonlaw.com

October 25, 2002

Florida Department of State
Division of Corporations
Attn: Partnership Section
P.O. Box 6327
Tallahassee, Florida 32314

RE: Gourmand, LLLP

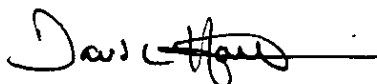
To whom it may concern:

Enclosed please find the Limited Partnership Reinstatement along with a filing fee check in the amount of \$141.25. The undersigned is counsel for the above stated Limited Partnership. The undersigned was advised that the annual reports were either lost and/or misplaced. The Limited Partnership has filed the enclosed documents upon the immediate receipt of the Limited Partnership Reinstatement document from the Secretary of State. Based on the foregoing, the undersigned respectfully requests that the Secretary of State waive the \$500.00 Reinstatement Fee and accept the enclosed check in the amount of \$141.25 as full and sufficient payment to reinstate said Limited Partnership.

Please contact my office should you have any questions regarding the foregoing.

Thank you for your cooperation.

Sincerely yours,



David L. Hatton

DLH/jr

Enclosure