

A04000000648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

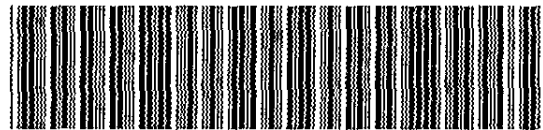
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
04 APR -9 PM 12:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
04 APR -9 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BR



CORPORATION SERVICE COMPANYSM

1201 Hays Street
Tallahassee, FL 32301
850-521-1000
850-521-1010(fax)

FILED
04 APR - 9 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Account Number: 072100000032

Client Account Number: _____

Cost Limit: 297.50

Authorization: Patricia Pigato

Contact: _____

Corporation Name(s) & Document number(s)

- 1) Lillian family Partnership, Ltd.
- 2) _____
- 3) _____
- 4) _____

Type of Filings:

<u>New Filings</u>	<u>Amendment</u>	<u>Qualification</u>
<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Profit
<input type="checkbox"/> NFP	<input type="checkbox"/> COA	<input type="checkbox"/> NFP
<input type="checkbox"/> LLC	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> LLC
<input checked="" type="checkbox"/> LTD	<input type="checkbox"/> Merger	<input type="checkbox"/> LTD

Other:

☐ Annual Report ☐ Fictitious Name ☐ Reinstatement



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 19, 2004

CSC

TALLAHASSEE, FL

SUBJECT: LILLIAN FAMILY PARTNERSHIP, LTD.
Ref. Number: W04000014070

We have received your document for LILLIAN FAMILY PARTNERSHIP, LTD. and the authorization to debit your account in the amount of \$297.50. However, the document has not been filed and is being returned for the following:

As discussed, the name "MPD CORP." is NOT AVAILABLE. And so the corporation still hasn't been filed.

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) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 204A00025601

RESUBMIT

Please give original
submission date as file date.

FILED
04 APR - 9 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
04 APR 20 AM 8:34
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 12, 2004

CSC

TALLAHASSEE, FL

SUBJECT: LILLIAN FAMILY PARTNERSHIP, LTD.
Ref. Number: W04000014070

RESUBMIT

Please give original
submission date as file date.

We have received your document for LILLIAN FAMILY PARTNERSHIP, LTD. and the authorization to debit your account in the amount of \$297.50. However, the document has not been filed and is being returned for the following:

Before this partnership can be filed, its CORPORATE GENERAL PARTNER must be filed.

Since the name MDP CORP. is not available in Florida, we assume you will be filing the corporate general partner under a new name. Please correct the GP name on the limited partnership documents.,

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) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 404A00023691

FILED
04 APR -9 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
04 APR 15 PM 1:17
DIVISION OF CORPORATIONS

CERTIFICATE OF LIMITED PARTNERSHIP

OF

**LILLIAN FAMILY PARTNERSHIP, LTD.
A FLORIDA LIMITED PARTNERSHIP**

FILED
04 APR -9 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned General Partner desiring to form a limited partnership pursuant to Florida Revised Uniform Limited Partnership Act as set forth in Part I, Chapter 620 of the Florida Statutes, hereby states the following:

1. The name of the limited partnership is **LILLIAN FAMILY PARTNERSHIP, LTD.** (the "Partnership").
2. The address of the office of the Partnership is 13 Fieldbrook Road, Marblehead, Massachusetts 01945.
3. The name and address of the agent for service of process of the Partnership is:

LINDA L. SNELLING, ESQ.
SACHS, SAX, KLEIN
301 Yamato Road, St. 4150
Boca Raton, FL 33431

I am familiar with and hereby accept this appointment and the obligations associated with this designation as registered agent for service of process within the State of Florida of the proposed Limited Partnership named in this Certificate of Limited Partnership hereinabove set forth and do hereby further state that I may be found as registered agent for service of process upon said proposed entity at the address set forth above.

4. The name and address of the General and Limited Partners are as follows:

General Partner:

MPD GENERAL, CORP.
13 Fieldbrook Road
Marblehead, Massachusetts 01945

PO4 0000 659 63

Limited Partners:

DONNA KAGAN
13 Fieldbrook Road
Marblehead, Massachusetts 01945

PHYLLIS COHEN
195 Falmouth Road, #1C
Mashpee, Massachusetts 02649

MELVIN RUBIN
41 Lohnes Road
Framingham, Massachusetts 01701

5. The mailing address of the Partnership is **LILLIAN FAMILY PARTNERSHIP, LTD.**, 13 Fieldbrook Road, Marblehead, Massachusetts 01945.

6. The latest date upon which the Partnership will dissolve is 3/31/2054.

7. A conveyance or encumbrance of real property held in the Partnership name, and any other instrument affecting title to real property in which the Partnership has an interest shall be executed in the Partnership name by the General Partner.

The execution of this Certificate by the undersigned General Partner constitutes an affirmation under penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by the General Partner of the **LILLIAN FAMILY PARTNERSHIP, LTD.** this 1st day of April, 2004.

GENERAL PARTNER:

MPD GENERAL, CORP.

By:

Donna Kagan, President
DONNA KAGAN, President

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME the undersigned, personally appeared **DONNA KAGAN** as President, on behalf of **MPD GENERAL, CORP.**, the General Partner of the **LILLIAN FAMILY PARTNERSHIP, LTD.**, a Florida Limited Partnership, hereinafter referred to as the "Partnership", who, upon being duly sworn, did certify as follows:

1. The amount of capital contributions of the Limited Partners is attached hereto as Exhibit "A".

2. The anticipated amount of additional capital contributions of the Limited Partners is none at this time.

FURTHER AFFIANT SAYETH NAUGHT.

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true, to the best of my knowledge and belief.

Dated this 5th day of April, 2004.

GENERAL PARTNER
MPD GENERAL, CORP.

By:

Donna Kagan
DONNA KAGAN, Secretary

STATE OF ~~FLORIDA~~ MASS)
) ss:
COUNTY OF ~~PALEM BEACH~~)
ESSEX

The foregoing instrument was acknowledged before me this 1st day of April, 2004, by **DONNA KAGAN**, President of **MPD GENERAL, CORP.**, the General Partner of **LILLIAN FAMILY PARTNERSHIP, LTD.**, who is personally known to me or who did identify herself by _____.

Notary Seal

Norma Jean Rubin
Notary Public

Norma Jean Rubin
Name Printed

EXHIBIT "A"

Schedule of Partners' Capital Contribution

<u>General Partner</u>	<u>Percentage in cash or Property</u>	<u>Initial Capital Contributed or to be Contributed</u>
MPD GENERAL, CORP. 13 Fieldbrook Road Marblehead, MASS 01907	1 %	\$ 300.00
<u>Limited Partner</u>		
DONNA KAGAN 13 Fieldbrook Road Marblehead, Mass 01945	33.33%	\$ 9,900.00
PHYLLIS COHEN 195 Falmouth Road, #1C Mashpee, Massachusetts 02649	33.33%	\$ 9,900.00
MELVIN RUBIN 41 Lohnes Road Framingham, Massachusetts 01701	33.33 %	\$ 9,900.00
		<u>\$30,000.00</u>