

AD0000000326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

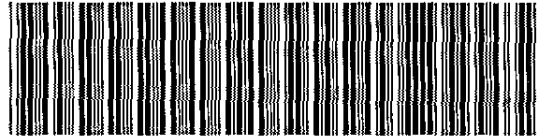
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2006 MAR -2 PM 2:47  
TALLAHASSEE, FLORIDA

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06 MAR -2 PM 12:14  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN MAR -2 2006

## ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222-2785

Phone #

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

1- TMN FAMILY LIMITED PARTNERSHIP

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

#### NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<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 checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP  
FOR  
TMN FAMILY LIMITED PARTNERSHIP

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2006 MAR -2 PM 2:41  
DIVISION OF REVENUE  
TALLAHASSEE, FLORIDA

1. The name of the partnership is TMN Family Limited Partnership.
2. The street address of the initial designated office is: 605 North Shore Drive, Miami Beach, FL 33141.
3. The name and address of the registered agent is: June D. Nejman, as managing member of NEJ LLC, 605 North Shore Drive, Miami Beach, FL 33141.
4. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept all obligations of my position as registered agent.

  
June D. Nejman

5. The name and address of each general partner:

June D. Nejman, as managing member of NEJ LLC  
605 North Shore Drive  
Miami Beach, FL 33141

Signed this 23 day of February, 2006.

  
June D. Nejman, as managing member of NEJ LLC  
General Partner