

AD6000001521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

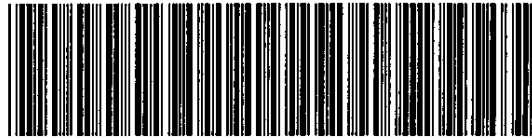
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SECRETARY OF STATE
DIVISION OF CORPORATION
06 DEC 22 AM 11:26

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Schelhas Limited Partnership

(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

Jay L. Dolgin, Esq.

(Contact Person)

Dolgin & Fischer, LLC

(Firm/Company)

30 N. LaSalle St., STE 2610

(Address)

Chicago, IL 60602 (Cook County)

(City, State and Zip Code)

For further information concerning this matter, please call:

Jay L. Dolgin, Esq.

(Name of Contact Person)

at (312) 705-2000

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$1,000.00 Filing Fees
(\$965 Filing Fee and
\$35 Registered Agent
Fee)

☐ \$1,008.75 Filing Fees
and Certificate of
Status

☐ \$1,052.50 Filing Fees
and Certified Copy

☐ \$1,061.25 Filing Fee,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

1. The Schelhas Limited Partnership

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

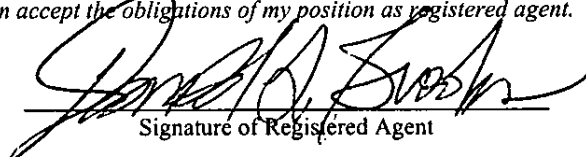
2. Illinois 3. 3/29/2006
(State or Country of Formation) (Date of Formation)

4. Donald Brooks, Esq.
(Name of Registered Agent for Service of Process)

5. 725 North Highway A1a, Suite E109
(Florida street address for Registered Agent)

Jupiter, Florida 33477

6. 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 the obligations of my position as registered agent.


Signature of Registered Agent

7. The Schelhas Limited Partnership, c/o Mary Ann Jordan
(Principal office address)

107 Oxford Avenue, Claredon Hills, Illinois 60514

8. If limited partnership is a limited liability limited partnership, check box ☐

9. 30 North LaSalle St., STE. 2610
(Mailing address)
Chicago, IL 60602 (Cook County)

10. Name, principal office address, and mailing address of each general partner:

<u>Mary Ann/Cub, LLC</u>	<u>107 Oxford Ave., Clarendon Hills,</u>
(Name)	(Street Address)
	<u>IL 60514, Dupage County</u>
	<u>(same as above) MDL-7133</u>
	(Mailing Address)
<u></u>	<u></u>
(Name)	(Street Address)
	<u></u>
	(Mailing Address)
<u></u>	<u></u>
(Name)	(Street Address)
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	(Mailing Address)
<u></u>	<u></u>
(Name)	(Street Address)
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	(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

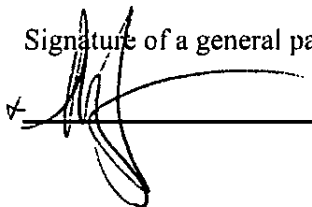
11. Effective date, if other than the date of filing: _____.

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 30 day of October, 20 06.

Signature of a general partner:



Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75