

A09000000296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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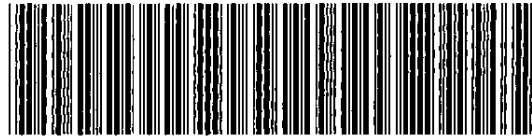
Certificates of Status _____

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~~W09-1590~~ + A09-296

04/03/09--01018--005 **1000.00

Send 1st
page for LP
& 2nd page
of LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 MAY - 4 PM 2:12

FILED

N. CAUSSEAU

MAY 5 - 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Martha Perez Family Limited Partnership

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

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

Jason Warshofsky

(Contact Person)

Jason Warshofsky, P.A.

(Firm/Company)

2937 SW 27 Avenue, Suite 203

(Address)

Miami, Florida 33133

(City, State and Zip Code)

For further information concerning this matter, please call:

Jason Warshofsky

(Name of Contact Person)

at (305) 446-1244

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$1,000.00 Filing Fees ☐ \$1,008.75 Filing Fees ☐ \$1,052.50 Filing Fees ☐ \$1,061.25 Filing Fees,
(\$965 Filing Fee and and Certificate of and Certified Copy Certified Copy, and
\$35 Registered Agent Status Status
Fee)

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

CR2E030 (01/06)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2009

JASON WARSHOFSKY, ESQUIRE
JASON WARSHOFSKY, P.A.
2937 SW 27 AVENUE, SUITE 203
MIAMI, FL 33133

SUBJECT: MARTHA PEREZ FAMILY LIMITED PARTNERSHIP
Ref. Number: W09000015901

We have received your document for MARTHA PEREZ FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Page one is correct for filing of a Florida Limited Partnership, however your second page is for the filing of a Limited Liability Company. Therefore we enclosing the correct form.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if the applicant fails to reply or resubmit the corrected/amended application within three months from date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux
Document Specialist Supervisor

Letter Number: 909A00011446

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

FILED
09 MAY -4 PM 2:12
TALLAHASSEE, FLORIDA

1. Martha Perez Family 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.

2. 540 Brickell Key Drive, Apt. 1815

(Street address of initial designated office)

Miami, Florida 33131

3. Carlota Chumi

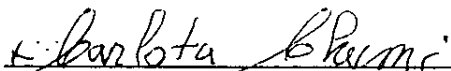
(Name of Registered Agent for Service of Process)

4. 540 Brickell Key Drive, Apt. 1815

(Florida street address for Registered Agent)

Miami, Florida 33133

5. *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

6. 540 Brickell Key Drive, Apt. 1815

(Mailing address of initial designated office)

Miami, Florida 33133

7. If limited partnership elects to be a limited liability limited partnership, check box ☐

L09-38806

8. Name and business address of each general partner:

Name:

Business Address:

Martha Perez Control, LLC

540 Brickell Key Drive, Apt. 1815

Miami, Florida 33131

09 MAY -4 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

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

Signed this 23 day of March, 2009.

Signature of each general partner:

Martha Perez

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

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

\$52.50

\$8.75