

**A090000000620**

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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

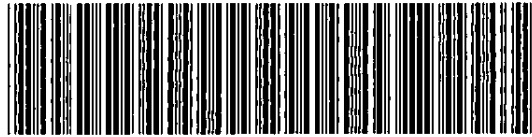
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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08/12/09--01022--009 \*\*1052.50

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09 AUG 19 PM 2:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

~~RECEIVED~~ AUG 14 2009

J. BRYAN

AUG 20 2009

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Frank Family Investments, Ltd.

(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:

Paul M. Cummings

(Contact Person)

Weiner & Cummings, P.A.

(Firm/Company)

1428 Brickell Avenue, Suite 400

(Address)

Miami, FL 33131

(City, State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Paul M. Cummings at ( 305 ) 371-7800

(Name of Contact Person)

(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 Fees, 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

CR2E030 (01/06)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 14, 2009

PAUL M. CUMMINGS  
WEINER & CUMMINGS, P.A.  
1428 BRICKELL AVENUE, SUITE 400  
MIAMI, FL 33131

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09 AUG 19 PM 2:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for FRANK FAMILY INVESTMENTS LTD. and your check(s) totaling \$1052.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 709A00027768

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

**FILED**  
09 AUG 19 PM 2:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Frank Family Investments, Ltd.

(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. 780 Lugo Avenue

(Street address of initial designated office)

Coral Gables, FL 33156

3. Paul M. Cummings

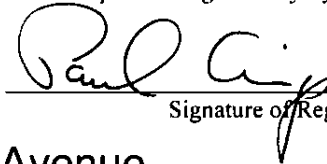
(Name of Registered Agent for Service of Process)

4. 1428 Brickell Avenue, Suite 400

(Florida street address for Registered Agent)

Miami, FL 33131

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. 780 Lugo Avenue

(Mailing address of initial designated office)

Coral Gables, FL 33156

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

8. Name and business address of each general partner:

Name:

Business Address:

Frank Family Management, LLC

780 Lugo Avenue

#L09000080432

Coral Gables, FL 33156

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09 AUG 19 PM 2:40  
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 14<sup>th</sup> day of April, 2009.

Signature of each general partner:

Elizabeth Frank

Managing Member of Frank Family Management, LLC

**Filing Fees:**

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

**Certified Copy (optional):**

**\$52.50**

**Certificate of Status (optional):**

**\$8.75**