

**A09000000925**

(Requestor's Name)

(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



400163780244

12/21/09--01067--030 \*\*1000.00

**FILED**  
2009 DEC 21 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**

**DEC 22 2009**

**EXAMINER**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JNF Family Limited Liability 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:

Sandra Z. Green

Contact Person

JONATHAN H. GREEN & ASSOCIATES, P.A.

Firm/Company

799 Brickell Plaza Suite 700

Address

Miami, Florida 33131

City, State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Z. Green

Name of Contact Person

at ( 305 ) 372-5100

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 Certificate of 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

FILED

**CERTIFICATE OF LIMITED PARTNERSHIP**

2009 DEC 21 AM 11:43

**OF THE**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**JNF FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP**

**THIS CERTIFICATE** is duly executed and filed pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986), as amended (the "Act"), in order to form a limited partnership under the Act.

- (a) **Name.** The name of the subject limited partnership is the JNF FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP (the "Partnership").
- (b) **Recordkeeping Office.** The address of the office at which the Partnership shall keep the records required to maintained under the Act is:

100 S. Pointe Dr., #808  
Miami Beach, Florida 33139

**Registered Agent; Registered Office.** The name and address of the agent for service of process on the Partnership required to be maintained under the Act are:

Jonathan H. Green & Associates, P.A.  
799 Brickell Plaza, Suite 700  
Miami, FL 33131

- (c) **General Partner.** The names and business address of the General Partner(s) are:

Jack N. Franco

- (d) **Mailing Address.** The mailing address of the Partnership is:

100 S. Pointe Dr., #808  
Miami Beach, Florida 33139

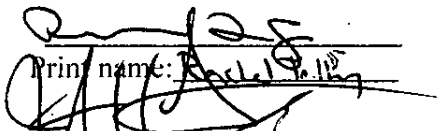
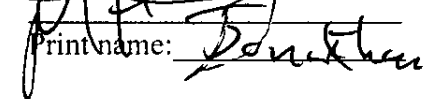
- (e) **Term.** The latest date upon which the Partnership is to dissolve is December 31, 2055.

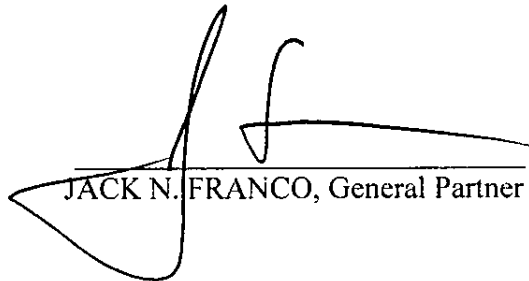
- (f) **Election.** If limited partnership elects to be a limited liability limited partnership, check box ☒.

IN WITNESS WHEREOF, the general partner has duly executed this

Certificate, this 15 day of December, 2009.

WITNESSES:

  
Print name: Rachel P. King  
  
Print name: Jonathan H. Green

  
JACK N. FRANCO, General Partner

FILED  
2009 DEC 21 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CONSENT TO SERVE AS REGISTERED AGENT**

**FOR THE**

**JNF FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP**

**FILED**  
2009 DEC 21 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Having been appointed to serve in the State of Florida as the registered agent of, and to accept service of process for, the JNF FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP, the undersigned hereby accepts said appointment and agrees to serve as said registered agent. The undersigned further agrees to comply with the provisions of all Florida statutes relative to the proper and complete performance of the undersigned's duties, and hereby acknowledges that the undersigned is familiar with and accepts the obligation of the undersigned's position as said registered agent.

Dated: December 15, 2009.

JONATHAN H. GREEN & ASSOCIATES, P.A.  
a Florida Corporation

By

  
JONATHAN H. GREEN

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**  
**TO THE**  
**JNF FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP**

The undersigned, the general partner of the JNF FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP, a Florida limited partnership, hereby certify that:

The amount of the capital contributions of the limited partners to date is:

\$0.00

The total amount anticipated to be contributed by the limited partners is:

\$5,000,000.00

FURTHER AFFIANTS SAYETH NOT.

Under penalties of perjury, the undersigned declare that he has read the foregoing and knows the contents of the foregoing, and that the facts stated in the foregoing are true and correct.

Dated: December 15, 2009.

WITNESSES:

Print name: Ronald Talm  
[Signature]

Print name: Jonathan H. Groer  
[Signature]

[Signature]  
JACK N. FRANCO, General Partner

FILED  
2009 DEC 21 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA