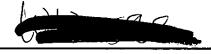
(Requestor's Name)
. •
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special instructions to Filing Officer:

L. SELLERS

FEB 1 7 2010

EXAMINER



Office Use Only



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02/03/10--01014--020 **1000.00

COVER LETTER

Division of Co				
SUBJECT: Bass Family Limited Partnership				
	ame of Florida Limited Partne			
The enclosed Certific	ate of Limited Partnershi	p and fees are subn	nitted for filing.	
Please return all corre	espondence concerning th	is matter to:		
Já	ason Warshofsky			
	Contact Person			
Jasc	on Warshofsky, P.A.			
	Firm/Company			
29	37 SW 27 Avenue			
	Address			
Mia	ami, Florida 33133			
City, State and Zip Code				
•	be used for future annual repor	,	_	
For further information	on concerning this matter	, please call:		
Jason W	/arshofsky at	t (<u>305</u>) 446	-1244	
Name of Contac	t Person	Area Code and Dayt	ime Telephone Number	
Enclosed is a check for	or the following amount:			
\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)		\$1,052.50 Filing Fees and Certified Copy	\$1,061.25 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS	S:	MAILING A	ADDRESS:	
Registration Section				
Division of Corporati Clifton Building	ons	Division of C P. O. Box 63		
2661 Executive Center Circle Tallahassee, FL 32314				
Tallahassee, FL 3230			·	

CR2E030 (01/06)



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 4, 2010

JASON WARSHOFSKY 2937 SW 27 AVENUE MIAMI, FL 33133

SUBJECT: BASS FAMILY LIMITED PARTNERSHIP

Ref. Number: W1000005868

We have received your document for BASS 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 010A00002961

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

1. M 9 L N 9 Bass Family Limited Partnership	
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffice Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L. or LLLP.	
2. 15405 Miami Lakeway De North, #305, Miami Lakes, FL 33014	
(Street address of initial designated office)	
3. Marina Bass	
(Name of Registered Agent for Service of Process)	
4. 15405 Miami Lakeway North, #305	
(Florida street address for Registered Agent)	
Miami Lakes, Florida 33014	
5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agrouply with the provisions of all statutes relative to the proper and complete performance of my dutie and I am familiar with and accept the obligations of my position as registered agent. Signature of Registered Agent	
6. 15405 Miami Lakeway North, #305	
(Mailing address of initial designated office)	
Miami Lakes, Florida 33014	
7. If limited partnership elects to be a limited liability limited partnership, check box	x 🔲

Page 1 of 2

8. Name and business address of ea Name:	ch general partner: <u>Business Address:</u>
Bass Control, LLC	15405 Lakeway North #305
	Miami Lakes, Florida 33014
9. Effective date, if other than the date of fi	iling:
(Effective date cannot be prior to no	r more than 90 days after the date the document is
filed by the Florida Department of S	tate.)
Signed this day or	59N401× . 2010.
Signature of each general partner	
Ill armallo	<u> </u>
	ASE 10
Filing Fees: Certified Copy (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Fee Fee Fee Fee Fee Fee Fee

Page 2 of 2

\$8.75

Certificate of Status (optional):