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(rte	questors Marrie)	
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(Adi	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer	
Opecial instructions to	imig Officer.	
		,

Office Use Only



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S. HAWKES

AUG 3 - 2010

EXAMINER



4000 HOLLYWOOD BOULEVARD · SUITE 485 SOUTH · HOLLYWOOD, FL 33021

BWD. 954.966.2112 • MIAMI 305.374.4382 • BOCA 561.447.9422 • FAX 954.981.1605 • E-MAIL firm@KramerGreen.com • www.KramerGreen.com

July 30, 2010

ROBERT M. KRAMER MITCHELL F. GREEN LESLIE H. ZUCKERMAN CRAIG M. GREENE ROBERT I. BUCHSBAUM ERIC J. STOCKEL

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

RE: 10095 N. KENDALL DRIVE, LLLP

To whom it may concern:

Enclosed please find the Certificate of Limited Partnership, along with a check in the amount of \$1,061.25 covering the filing fees for the above referenced entity.

Please feel free to contact me should you have any questions or concerns.

Sincerely,

KRAMER, GREEN, ZUCKERMAN, GREENE & BUCHSBAUM, P.A.

Robert M. Kramer

RMK/lzv Enclosure(s)

K:\BOB\SMITH & KUTNER\10095 N KENDALL DRIVE, LLLP\L-Dept of State.wpd

COVER LETTER

	egistration Section ivision of Corporations	
	•	N. Kendall Drive, LLLP
SUBJEC		tnership or Limited Liability Limited Partnership
The enclo	osed Certificate of Limited Partner	ship and fees are submitted for filing.
Please ret	turn all correspondence concerning	g this matter to:
	Robert M. Kramer	
	Contact Person	
Kramer	Green Zuckerman Greene & B	uchsbaum, PA
	Firm/Company	
. 4	1000 Hollywood Blvd., Suite 48	5-South
	Address	
	Hollywood, FL 33021	
	City, State and Zip Code	
ml . m a m a a m i	• •	
E-mai	@kramergreen.com if address: (to be used for future annual re	eport notification)
For further	er information concerning this mat	ter, please call:
	Robert M. Kramer	at (954) 966 - 2112
N	ame of Contact Person	Area Code and Daytime Telephone Number
Enclosed	is a check for the following amou	nt:
\$1,000.0 (\$965 Filin \$35 Registe Fee)	g Fee and and Certificate of	\$1,052.50 Filing Fees \$\sqrt{\$1,061.25}\$ Filing Fees, Certified Copy, and Certificate of Status
STREET	ADDRESS:	MAILING ADDRESS:
Registrati	ion Section	Registration Section
	of Corporations	Division of Corporations
Clifton B		P. O. Box 6327
	ecutive Center Circle see, FL 32301	Tallahassee, FL 32314

CR2E030 (01/06)

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

10095 N. Kendall Drive, LLLP

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

2	10095 N. Kendall Drive, Suite 102
	(Street address of initial designated office)
	Miami, FL 33176
3	Robert M. Kramer
	(Name of Registered Agent for Service of Process)
4.	4000 Hollywood Blvd., Suite 485-South
	(Florida street address for Registered Agent)
	Hollywood, FL 33021
comply with t	nccept the appointment as registered agent and agree to act in this capacity. I further agree to he provisions of all statutes relative to the proper and complete performance of my duties, iliar with and accept the obligations of my position as registered agent.
	Signature of Registered Agent
6	10095 N. Kendall Drive, Suite 102
,	 (Mailing address of initial designated office)
	Miami, FL 33176

Page 1 of 2

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

Name:	Business Address:
Eric S. Smith	10095 N. Kendall Drive, Suite 102
	Miami, FL 33176
Mark E. Kutner	10095 N. Kendall Drive, Suite 102
	Mlami, FL 33176
,	
•	
9. Effective date, if other than the date of filing:	· · · · · · · · · · · · · · · · · · ·
(Effective date cannot be prior to nor mo filed by the Florida Department of State	ore than 90 days after the date the document is .)
Signed this day of	July , 2010 .
Signature of each general partner:	
1 and	
1 S Mon Kety	7/27/10
Filing Fees: \$1	,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
•	2.50