Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110000228583)))



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To:

Division of Corporations

Fax Number : (850)617-6383

L. SELLERS

FEB - | 2011

From:

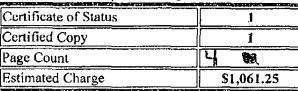
Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 : (850)521-1000 Phone Fax Number : (850)558-1515 EXAMINER

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA/FOREIGN LP/LLLP MST Holdings LP





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Corporate Filing Menu

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1/28/2011 10:52:28 AM PAGE 1/001 Fax Server



January 28, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORPORATION SERVICE COMPANY

SUBJECT: MST HOLDINGS LP

REF: W11000005445



We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

The document number of the name conflict is L07000095543.

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 FAX Aud. #: H11000022858 Letter Number: 611A00002416

P.O BOX 6327 - Tallahassee, Florida 32314



To: DIVISION OF CORPORATIONS

Company:

Fax: 8506176383

Phone:

From: Jeanine Reynolds

Fax:

Phone: (850) 521-0821x2933 E-mail: jreynold@cscinfo.com

NOTES:

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

| 1. MSET HOLDINGS LP |
|--|
| (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. 20185 East Country Club Drive, Apt 1201, Aventura FL, 33180 |
| (Street address of initial designated office) |
| 3. Corporation Service Company |
| (Name of Registered Agent for Service of Process) |
| 4. 1201 Hays Street, Tallahassee FL, 32301 |
| (Florida street address for Registered Agent) |
| 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 om familiar with and accept the obligations of my position as registered agent. Corporation Service Company Jeanine Reynolds as its agent |
| 6. 1155 E. 17th Street, Brooklyn, NY, 11230 |
| (Mailing address of initial designated office) |
| |

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

4 M. T. W.

| Name: | | Business Address: | | |
|--|--|--|--|--|
| Barry Escott Trust | 55 Regent | 55 Regent Street | | |
| FBO Stephen Escott | Bergenfiel | d, NJ 07621 | | |
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| 9. Effective date, if other than the date of | f filing: | | | |
| (Effective date cannot be prior to i filed by the Florida Department of | | s after the date the document is | | |
| Signed this 18th day | of January | 2011 | | |
| Signature of each general partner: stated herein are true. I/We am/are document to the Department of St. s.817.155, P.S. Youth Cost Thusbe a Bang East Thusbe a | I/We submit this doce aware that any false ate constitutes a third | ument and affirm that the facts information submitted in a | | |
| Cred Must \$60 High | <u> </u> | | | |
| Filing Fees: | \$1,000.00 (\$ 965 Fi) | ing Fee and \$35 Registered Agent Fee) | | |
| Certified Copy (optional): | \$52.50 | | | |
| Certificate of Status (optional): | \$8.75 | | | |

\$52.50 \$8.75 Page 2 of 2