

D. BRUCE
JUN 09 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MELMARKS ENTERPRISES LLLP

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:

MORRIS ENGELBERG, ESQUIRE

Contact Person

M. Engelberg & L. Milgrim, P. A.

Firm/Company

4040 Sheridan Street

Address

Hollywood, Florida 33021

City, State and Zip Code

morris_engelberg@bellsouth.net

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

For further information concerning this matter, please call:

Morris Engelberg, Esquire

Name of Contact Person

at (**954**) **966-3900**

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$1,000.00 Filing Fees
(\$965 Filing Fee and
\$35 Registered Agent
Fee) | <input type="checkbox"/> \$1,008.75 Filing Fees
and Certificate of
Status | <input checked="" type="checkbox"/> \$1,052.50 Filing Fees
and Certified Copy | <input type="checkbox"/> \$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)

FILED
11 JUN -1 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. MEMLARKS ENTERPRISES LLLP

(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. 17906 Aberdeen Way

(Street address of initial designated office)

Boca Raton, Florida 33496

3. Morris Engelberg, Esquire

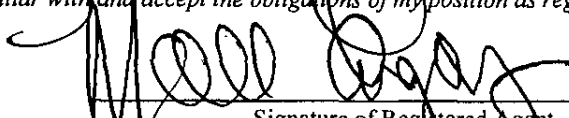
(Name of Registered Agent for Service of Process)

4. 4040 Sheridan Street

(Florida street address for Registered Agent)

Hollywood, Florida 33021

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
MORRIS ENGELBERG

6. 17906 Aberdeen Way

(Mailing address of initial designated office)

Boca Raton, Florida 33496

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

11 JUN -1 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

8. Name and business address of each general partner:

Name:

Business Address:

MELMARKS ENTERPRISES, INC.

17906 Aberdeen Way

Boca Raton, Florida 33496

P11000051383

11 JUN + 1 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

9. Effective date, if other than the date of filing: June 1, 2011

(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 _____ day of May, 2011.

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

MELMARKS ENTERPRISES, INC.

By: Mel Marks

MEL MARKS, President

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

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

\$52.50

\$8.75