

A12000000563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

W12000041466

Office Use Only



500238198865

08/07/12--01012--004 \*\*1008.75

12 OCT - 8 PM 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

D. BRUCE

OCT 9 2012

EXAMINER

LAW OFFICES  
**O'Malley & O'Malley, LLP**

John M. O'Malley, Esquire  
1360 NW 65<sup>th</sup> Avenue, Suite - N, Plantation, Florida 33313  
(954) 865-6832 (954) 583-0555 FAX

September 25, 2012

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RE: Ref. Number W12000041466

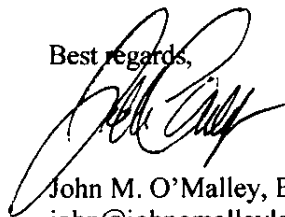
Dear Honorable State Officer,

I am submitting the documentation as required to create a limited partnership. I am also attaching the previous document that was returned to me by the state because the name of the limited partnership was unavailable.

I am also attaching the registration for the General Partner, a limited liability company out of the state of Wyoming. I have attached the Wyoming verification and the appropriate documents and fees to the state of Florida.

I am presently out of the country but if you have any concerns whatsoever, please contact my assistant, Mr. Kevin Linn at 954/583-0555. Thanking you kindly for your help.

Best regards,



John M. O'Malley, Esquire, MBA  
[john@johnomalleylaw.com](mailto:john@johnomalleylaw.com)  
954/865-6832

cc: client

JOM/slb

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 8, 2012

JOHN O'MALLEY, ESQ.  
1360 NW 65TH AVENUE, SUITE N  
PLANTATION, FL 33313

SUBJECT: BELLA MAR, L.P.  
Ref. Number: W12000041466

We have received your document for BELLA MAR, L.P. and your check(s) totaling \$1008.75. 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](http://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 614274.

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) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 612A00020533

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FROMKIN FAMILY 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:

Lewis Fromkin

Contact Person

Fromkin Enterprises, LLC

Firm/Company

5138 NW 109<sup>th</sup> Terrace

Address

Coral Springs, FL 33076

City, State and Zip Code

lfromkin@aol.com

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

For further information concerning this matter, please call:

John O'Malley, Esq.

Name of Contact Person

at ( 954 ) 865-6832

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$1,000.00 Filing Fees<br>(\$965 Filing Fee and<br>\$35 Registered Agent<br>Fee) | <input checked="" type="checkbox"/> \$1,008.75 Filing Fees<br>and Certificate of<br>Status | <input type="checkbox"/> \$1,052.50 Filing Fees<br>and Certified Copy | <input type="checkbox"/> \$1,061.25 Filing Fees,<br>Certified Copy, and<br>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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. FROMKIN FAMILY LIMITED PARTNERSHIP

(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. 5138 NW 109th Terrace

(Street address of initial designated office)

Coral Springs, Florida 33076

3. John O'Malley, Esquire

(Name of Registered Agent for Service of Process)

4. 1360 NW 65th Avenue Suite - N

(Florida street address for Registered Agent)

Plantation, FL 33313

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

6. 5138 NW 109th Terrace

(Mailing address of initial designated office)

Coral Springs, FL 33076

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

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8. Name and business address of each general partner:

Name:

Business Address:

Fromkin Enterprises, LLC

5138 NW 109th Terrace

Coral Springs, FL 33076

ML12000005647

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TALLAHASSEE, FLORIDA

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9. Effective date, if other than the date of filing: \_\_\_\_\_

*(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 5<sup>th</sup> day of September, 2012.

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.

Fromkin Enterprises, LLC  
by Lewis Franklin, MGRM

by Fromkin Enterprises LLC  
Beth Fromkin, MGRM

[Signature], MGRM  
[Signature], MGRM

**Filing Fees:**

**Certified Copy (optional):**

**Certificate of Status (optional):**

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

**\$52.50**

**\$8.75**