

A 14 00 0000212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

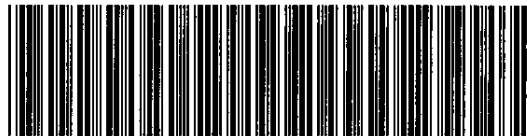
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/17/14--01007--031 **1061.25

FILED
14 APR 21 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 22 2014
J. Stevens

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201



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 19, 2014

ARTHUR WALTERS
950 HWY 98 EAST UNIT 6061
DESTIN, FL 32541

SUBJECT: M.M.T. ASSOCIATES LIMITED PARTNERSHIP
Ref. Number: W14000017516

We have received your document for M.M.T. ASSOCIATES LIMITED PARTNERSHIP and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

We did not receive page 2 of the application.,

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 714A00005903

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M.M.T. ASSOCIATES 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:

Arthur L. Walters

Contact Person

Trans American Research and Development Corporation

Firm/Company

950 Highway 98 East, Unit 6061

Address

Destin, Florida 32541

City, State and Zip Code

alw.etal@verizon.net

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

For further information concerning this matter, please call:

Arthur L. Walters

at (703) 527-5200

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) ☐ \$1,008.75 Filing Fees and Certificate of Status ☐ \$1,052.50 Filing Fees and Certified Copy ☒ \$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

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

1. M.M.T. ASSOCIATES 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. 950 HIGHWAY 98 EAST, UNIT 6061

(Street address of initial designated office)

DESTIN, FLORIDA 32541

3. ARTHUR L. WALTERS

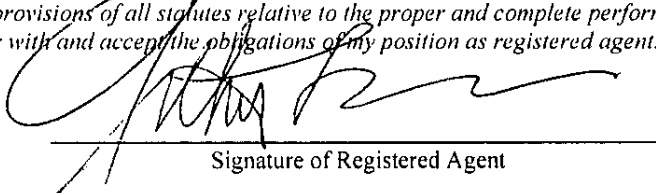
(Name of Registered Agent for Service of Process)

4. 950 HIGHWAY 98 EAST, UNIT 6061

(Florida street address for Registered Agent)

DESTIN, FLORIDA 32541

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. 950 HIGHWAY 98 EAST, UNIT 6061

(Mailing address of initial designated office)

DESTIN, FLORIDA 32541

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

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TALLAHASSEE, FLORIDA

8. Name and business address of each general partner:

Name:

Business Address:

TRANS AMERICAN RESEARCH
AND DEVELOPMENT
CORPORATION,
Sole General Partner

950 HIGHWAY 98 EAST, UNIT 6061
DESTIN, FLORIDA 32541

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
filed by the Florida Department of State.)*

Signed this 28th day of February, 2014

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 this
document to the Department of State constitutes a third degree felony as provided for in
s.817.155, F.S.

TRANS AMERICAN RESEARCH AND DEVELOPMENT CORPORATION,
a Virginia corporation, Registered in the State of Florida

By: _____

Arthur L. Walters, President

Filing Fees:

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

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

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14 APR 21 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA