

A14000000342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

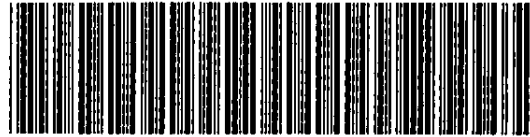
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W14-36938

Office Use Only



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06/11/14

B. BOSTICK
JUN 26 2014
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hamanit, 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:

Charles Capps, Esq.

Contact Person

Pavese Law Firm

Firm/Company

1833 Hendry Street

Address

Fort Myers, FL 33901

City, State and Zip Code

felix.gratopp@sympatico.ca

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

For further information concerning this matter, please call:

Charles Capps

at (239)

336-6219

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

CR2E030 (01/06)

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

1. Hamanit, 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. 139 Main Street, Unit 203

(Street address of initial designated office)

Unionville, ON L3R 2G6 Canada

3. Charles Capps, Esq.

(Name of Registered Agent for Service of Process)

4. 1833 Hendry Street

(Florida street address for Registered Agent)

Fort Myers, FL 33901

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. 139 Main Street, Unit 203

(Mailing address of initial designated office)

Unionville, ON L3R 2G6 Canada

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

8. Name and business address of each general partner:

Name:

Business Address:

Polish Investments Inc.

139 Main Street, Unit 203

Unionville, ON L3R 2G6 Canada

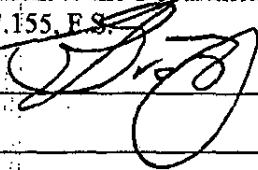
F11-2776

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 2ND day of JUNE, 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 a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



PRESIDENT, POLISH INVESTMENTS INC.

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

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

\$52.50

\$8.75



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2014

CHARLES CAPPS, ESQ.
1833 HENDRY STREET
FT. MYERS, FL 33901

SUBJECT: HAMANIT, LLLP
Ref. Number: W14000036938

We have received your document for HAMANIT, LLLP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 114A00012882

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JUN 13 2014
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